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ABSTRACT

The report to Congress examines progress made in implementing the requirements mandated by P.L. 94-142, the Education of the Handicapped Act, as amended by P.L. 98-199 with a specific focus on activities during the school year 1985-86. Substantially more detailed statistical information concerning educational services, compliance monitoring, and discretionary programs are provided in this year's report. Data are presented regarding the four major purposes of the Act: (1) to assure that all handicapped children receive a free, appropriate public education; (2) to assure that the rights of handicapped children and their parents or guardians are protected; (3) to assist states and localities in educating all handicapped children; and (4) to assess and assure the effectiveness of programs educating handicapped children. Among items highlighted in the executive summary are the following: (1) as a percentage of school enrollment, the number of handicapped children served decreased from 11.19% to 10.97%; (2) nearly 5.8 million related services were provided to 4.4 million handicapped children; (3) a majority of handicapped students received special education and related services in integrated settings; (4) the number of special education teachers employed increased 2% compared with a 0.5% increase in number of students served; (5) 80% of the states reported a need for improved instructional and vocational education program; and (6) nearly $12 billion were spent on special education and related services, of which 8.5% were from federal sources, 54% from state sources, and 38% from local sources. A major portion of the document consists of six appendixes providing more detail and statistical data. (DB)

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" TO ASSURE THE FREE APPROPRIATE PUBLIC EDUCATION OF ALL HANDICAPPED CHILDREN"

Education of the Handicapped Act, Section 618,
as amended by Public Law 98-199

Ninth Annual Report to Congress on the Implementation of The Education of the Handicapped Act

EC 200 550

U.S. Department of Education

1987

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" TO ASSURE THE FREE APPROPRIATE PUBLIC EDUCATION OF ALL HANDICAPPED CHILDREN"

Education of the Handicapped Act, Section 618,
as amended by Public Law 98-199

Ninth Annual Report to Congress
on the Implementation of
The Education of the
Handicapped Act

Prepared by the
Division of Innovation and Development
Office of Special Education Programs

1987

U.S. Department of Education
William J. Bennett, Secretary

U.S. Office of Special Education and
Rehabilitative Services
Madeleine Will, Assistant Secretary

Foreword

This Ninth Annual Report to the Congress on the implementation of the Education of the Handicapped Act (EHA) continues our reporting on the progress made since passage of the original legislation in 1975. This report, in order to be responsive to the additional data reporting requirements established by the Congress in the Education of the Handicapped Act Amendments of 1983, P.L. 98-199, provides a new and more detailed statistical description of our national efforts to educate handicapped children and youth. In addition, the Congress required that a description of our compliance monitoring activities and findings be included in this Annual Report. Finally, the Amendments of 1983 included a number of reporting requirements related to our discretionary programs. The result of these additional reporting requirements is a significantly more detailed profile of the status and condition of national efforts to provide all handicapped children a free appropriate public education. Information on the 1985-86 school year is presented.

The information in this report clearly attests to strong Federal, State, and local programmatic and fiscal commitments, and the efforts of schools and parents to develop new partnerships in the education of handicapped children. This report documents differences among States in the special education and related services provided students within the framework of the EHA. There are variations in the number of preschool handicapped children receiving special education and related services, the settings in which elementary and secondary aged children with handicaps receive special education, and in how and when children with handicaps leave school. Our Federal initiatives as presented in this report address some of the issues underlying this variability.

This report includes examples of Federal and State efforts which have advanced our knowledge and understanding; developed new approaches and models for improving instruction, learning, and the delivery of special education and related services; and strengthened our national capacity to enhance the quality of education for all handicapped children. These efforts by Federal and State agencies, direct service providers, institutions of higher education, and parents provide the basis for significantly advancing current practice in order that all children with handicaps are provided the educational opportunities necessary to lead fulfilling and independent lives.

Madeleine Will
Assistant Secretary,
Office of Special Education
and Rehabilitive Services

Preface

Section 618(f)(1) of Part B of the Education of the Handicapped Act (EHA-B) (20 U.S.C. 1401, 1411 et seq.) requires the Secretary to transmit to Congress an annual report that describes the progress being made in implementing the Act. This is the ninth annual report that has been prepared to provide Congress with a continuing description of our Nation's progress in providing a free appropriate public education for all handicapped children.

Each chapter describes one of the four purposes of the Act as established by Section 601(c) of the Education of the Handicapped Act (EHA). These four purposes are (1) to assure that all handicapped children receive a free appropriate public education, (2) to assure that the rights of handicapped children and their parents or guardians are protected, (3) to assist States and localities to provide for the education of all handicapped children, and (4) to assess and assure the effectiveness of efforts to educate handicapped children.

The information presented in this report was obtained from several sources. National statistics on numbers of children receiving special education and related services, numbers of handicapped children receiving special education in various settings, and numbers of school personnel available and needed to provide such services are reported annually to the Office of Special Education Programs (OSEP) by the States. The EHA-B child count information is based on the number of handicapped children receiving special education and related services on December 1, 1985. The remainder of the information on settings and personnel was provided for school year 1984-85.

OSEP's monitoring visits to the States during school years 1984-85 and 1985-86 have provided additional national data on the progress of implementation. The reporting requirements established under the Education of the Handicapped Act Amendments of 1983, P.L. 98-199, and those of 1986, P.L. 99-457, have yielded a substantial amount of descriptive information on discretionary programs. This information includes: the evaluation of discretionary programs incorporated in Chapter III; the extensive descriptive and tabular information from the Handicapped Children's Early Education Program, including a cross-agency analysis of services provided through other programs at national, State, and local levels (Appendix D); and information from special studies designed to describe, analyze, and disseminate findings on the progress being made to implement EHA-B. Chapter III also includes a report on Federal, State, and local expenditures.

The appendices also contain the annual reports to Congress specified by Part F, Section 653, on the Media and Materials Centers, and a current reconciliation of data on the Deaf-Blind population.

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Executive Summary

This Ninth Annual Report to Congress examines the progress being made to implement the requirements mandated by the Education of the Handicapped Act (EHA), P.L. 94-142, and its subsequent amendments. The purposes of the Act, as stated in Section 601 (c), are

(1) to assure that all handicapped children have available to them a free appropriate public education,

(2) to assure that the rights of handicapped children and their parents are protected,

(3) to assist States and localities to provide for the education of all handicapped children, and

(4) to assess and assure the effectiveness of efforts to educate handicapped children.

This report provides a detailed description for the 1985-86 school year of the activities undertaken to implement the Act and an assessment of the impact and effectiveness of its requirements. The following sections provide brief summaries of the information presented in the body of this report.

Students Receiving a Free Appropriate Public Education

Number of Students Served

The States reported that 4,370,244 handicapped children received special education and related services under Chapter 1 of the Education Consolidation and Improvement Act - State Operated Programs (ECIA (SOP)) and EHA-B during school year 1985-86. Only about 7,000 more students were served in 1985-86 than had been served in 1984-85. This is the smallest annual increase in the number of handicapped children and youth receiving special education and related services since the enactment of P.L. 94-142. As a percentage of school enrollment, the number of handicapped children served decreased slightly between 1984-85 and 1985-86 from 11.19 percent to 10.97 percent; this was the first decrease in the proportion served since child count data have been collected from the States.

The proportion of children served by age group under EHA-B did not change markedly between 1984-85 and 1985-86. Children aged 6 through 11 represented 48 percent of students receiving special education and related services under EHA-B, students aged 12 through 17 represented 41 percent. The number of students aged three through five served represented 6.3 percent of students receiving special education and related services. The number of 18 to 21 year olds served under EHA-B has continued to increase at a greater rate than the overall 3 through 21 year old handicapped population. Between 1984-85 and 1985-86, the number of 18 to 21 year old students receiving special education and related services increased 2.2 percent, from 2.6 to 4.8 percent; the increase for the all students served under EHA-B was 0.2 percent. Children aged three to five represented about 6 percent of the students served, an increase of .6 percent.

In 1985-86, all States reported the number of children and youth served under EHA-B by individual age years. The number of children served increased steadily from age three to eight. The number served peaked at age 8 and slowly declined from there until age 14 when there was a slight increase. At age 15, the number of children served decreased rapidly as handicapped youth began to leave school.

When the proportion of students served under Chapter 1 of ECIA (SOP) and EHA-B is examined by handicapping condition, some changes are observed from the previous school year. Learning disabled children presently account for 42.8 percent of all children receiving special education and related services. The number of children reported as learning disabled grew only 1.8 percent over the last 2 years. The number of children reported as mentally retarded decreased by 4.4 percent; currently, mentally retarded children account for 15.7 percent of all handicapped children served. Emotionally disturbed children account for 8.6 percent of the students served; the number of children classified as emotionally disturbed increased 1.0 percent over the past 2 years.

Hard of hearing and deaf children account for 1.6 percent of the handicapped students served while visually handicapped and deaf-blind children each account for less than 1 percent of the population. The number of children categorized as hard of hearing and deaf, and the number of visually handicapped students each decreased by 4 percent from 1984-85 to 1985-86 while the number of deaf-blind children increased by 7.0 percent over the same period. Multihandicapped students constitute 2.1 percent of the students served; this was an increase of 25 percent in the number of children served over the number served in 1984-85.

Related Services Received

Information was reported by the States for the first time on the number of related services received by handicapped children during the 1984-85 school year. Nearly 5.8 million related services were provided to the 4.4 million handicapped children and youth who received special education and related services. Transportation was the most prevalent related service provided with over 1 million students receiving this service. Diagnostic services and psychological services were each provided to about three-fourths of a million students. The number of related services provided to students varied depending on the severity of the handicapping condition. For example, an average of more than 10 related services was provided to each deaf-blind student while speech or language impaired children received an average of one related service for each child counted.

Least Restrictive Environment

During the 1984-85 school year, the majority of handicapped children received special education and related services in settings with nonhandicapped students. Nearly 27 percent received special education in regular classes, 42 percent received services in resource rooms, and nearly 24 percent were placed in separate classes within regular education buildings. Significant variation in placement patterns existed among the various handicapping conditions. For example, while most learning disabled and speech or language impaired students were served in regular classes or resource rooms, over 50 percent of mentally retarded students were placed in separate classes.

Personnel Employed and Needed

States reported that the number of special education teachers employed increased between 1983-84 and 1984-85. Adjusting for the differences in reporting requirements for these years, the number of special educators increased from 268,629 to 274,519, an increase of 2 percent compared with a 0.5 percent increase in the number of students served under Chapter 1 of ECIA (SOP) and EHA-B during the same period.

Categories of special educators that increased included teachers of the mentally retarded, learning disabled, emotionally disturbed, multihandicapped, speech impaired, hard of hearing and deaf, and other health impaired. Categories that decreased were teachers of the orthopedically impaired, the visually handicapped, and the deaf-blind.

States and Insular Areas reported that 22,852 additional teachers were needed to fill vacancies and replace uncertified staff. The categories of special education teachers reported by States as the most needed paralleled the relative prevalence of handicapping conditions. States reported that the greatest proportional increase needed was for teachers to serve learning disabled, mentally retarded, emotionally disturbed, and speech or language impaired students. These four categories accounted for 84 percent of all teachers needed and 93 percent of students served under Chapter 1 of ECIA (SOP) and EHA-B.

The number of personnel other than special educators employed in 1984-85 was 219,737. This represented an increase of 7 percent over the count reported in 1983-84. States reported an increase of 8,144 staff other than special educators was needed to fill vacancies and replace uncertified staff. In proportion to the number of personnel employed, physical therapists and occupational therapists were the most needed personnel, followed by SEA supervisors and administrators.

The Number of Handicapped Youth Who Exited

Data on handicapped students exiting from school was collected for the 1984-85 school year and is reported for the first time in this report. A total of 212,000 handicapped students 16 years and older were reported to have exited the educational system. Of this total, 39 percent graduated with a diploma, 15 percent graduated with a certificate of completion, 4 percent reached the maximum age for services, 21 percent dropped out, and 18 percent either left for other reasons or the reason for exit was unknown. Though significant variation existed among States, these data demonstrate that a large number of handicapped youth received diplomas. The drop-out rate was significant particularly for the emotionally disturbed population who have a drop-out rate of 29 percent.

Anticipated Services

Under the 1983 Amendments to EHA, OSEP is providing data to Congress for the first time on the services students exiting the educational system are anticipated to need in the following school year. Based on the responses from 50 States and Insular Areas, approximately 461,000 transitional services were anticipated to be needed in 1985-86. The largest number of services needed were vocational/training services followed by counseling/guidance and vocational placement services. The type of services anticipated to be needed differed greatly by handicapping condition. States reported 34,751 students needing no services.

Comparing these data with the data on the number of students exiting the educational system, about two services were found to be anticipated per student. Not unexpectedly, the learning disabled and speech impaired students needed the fewest services per pupil, about one per student. The deaf-blind and multihandicapped students were believed to need the most transitional services per pupil, 7 and 6, respectively. For all of the exiting students, about one-third were anticipated to need counseling and guidance, vocational/training services, and vocational placement. About one quarter were in need of evaluation for vocational rehabilitation services.

While these data were largely estimated by the States, they provide the first nationwide information concerning services that adult service agencies will need to provide to exiting students.

Services in Need of Improvement

The number of children and youth with handicaps needing improved services were reported for the 1984-85 school year by 51 States and Insular Areas. Almost 450,000 students were reported as needing improved services. Of the total number of students served under Chapter 1 of ECIA (SOP) and EHA-B in 1984-85, 12.3 percent were in need of improved services. Learning disabled and speech or language impaired students were least likely to need improved services while the severely handicapped were most in need of improved services. When the data on children needing improved services by age group is compared to the EHA-B child count by age group, the 18 to 21 year old age group was most in need of improved services followed by the three to five year old age group.

The number of States indicating a need for various types of improved services were:

- instructional programs - 43 States;
- vocational education - 42 States;
- assessment - 34 States;
- instructional settings - 32 States;
- evaluation - 27 States; and
- physical education programs - 23 States.

The related services most frequently indicated as needing improvement included physical therapy (39 States), occupational therapy (37 States), psychological services (33 States), and parent/training (32 States).

Several areas of concern were evident in the descriptions provided by the States of the specific improvements needed for special education programs and services. These areas of improvement were personnel training and availability; preschool programs; transitional programs; programs for specific handicapping conditions; evaluation and assessment; rural special education; and interagency cooperation.

The Implementation of Key Provisions of the Act Assuring the Rights of Handicapped Children

The key provisions of EHA provided an unprecedented opportunity for parents and schools to join together in a partnership to plan, implement and evaluate educational programs for children with handicaps. Since the enactment of EHA there has been a steady expansion of parent and disability organizations and coalitions; these groups provide the knowledge, skills, and support necessary for parents to participate as full partners with schools in their children's education. National information networks have been established with Federal funding to support these efforts and to provide families and students with information on programs and services. As parents over the last 10 years have assumed their rights and opportunities under EHA-B, they have worked extensively to create effective partnerships with their children's schools. This experience has been characterized by significant variability in the willingness and capacity of schools and parents to cooperatively identify, address, and resolve the needs of children with handicaps. While the due process requirements of EHA have been implemented and provide a means for resolving disputes between schools and parents, unanticipated fiscal and personal costs have sometimes resulted. Consequently, State and local educational agencies have established supplementary opportunities such as mediation prior to due process hearings to enable schools and parents to resolve disputes in a less costly manner.

Assisting States and Local Agencies in Educating All Handicapped Children

Entitlement and Discretionary Monies

Federal, State and local use of entitlement and discretionary monies authorized under EHA have resulted in developing effective models and approaches for addressing the complex program and service needs associated with early intervention, preschool programs, integration of regular and special education services, and provision of transitional services. These advances have the potential for significantly improving current practice. The continuing challenge is to hasten the transfer of these models and approaches to teacher training and direct service programs.

Expenditures

The 1984-85 annual data reports included a data requirement, mandated by Section 618 of the EHA Amendments of 1983, that States report funds expended for special education and related services during school year 1982-83; these funds expended were to be all costs associated with providing special education and related services to handicapped children and youth that are above and beyond the costs of providing regular education programs to nonhandicapped students.

For 1982-83, the States and Insular Areas reported spending almost $12 billion dollars on special education and related services. About 8.5 percent of these monies were attributed to Federal sources, about 54 percent to State sources and about 38 percent to local sources. Approximately 60 percent of the total was expended for special education programs; 40 percent was expended for related services. Per pupil expenditures for all children served under Chapter 1 of ECIA and EHA-B, ranged from $679 to $5,970. The average per pupil expenditure was $2,788.

Federal sources funded between 1.2 percent and 75 percent of total expenditures for special education and 2 to 66 percent for related services. According to data provided by 39 States, expenditures from State sources for special education ranged from 24 percent to about 88 percent, and expenditures for related services ranged from about 12 percent to 86 percent. Responses from these States indicated that expenditures from local sources for special education ranged between 4 and 66 percent; for related services, the range was from 4 to 79 percent.

Efforts to Assess and Assure the Effectiveness of Programs Educating Handicapped Children

Federal and State efforts to monitor compliance with statutes, regulations, and administrative policies governing the education of handicapped children are characterized by improvements in the precision and continuity of their procedures. Federal monitoring efforts have been strengthened by integrating a wider and more extensive base of State information for reviewing not only the substance but also the outcomes associated with specific policies. State educational agencies are continuing to expand their monitoring efforts to assure continuous oversight of Statewide implementation of EHA-B. This progression from intermittent to continuous monitoring is evidenced in the SEAs' increased use of information obtained from local applications, complaint management systems, due process hearings, annual data reports, on-site visits, and public comment for purposes of assessing and assuring compliance. While the State educational agencies continue to enhance the overall effectiveness of their monitoring procedures, the general supervision requirements persist as a significant challenge. Federal, State, and local efforts to assess the impact and effectiveness of programs and services provided to children with handicaps is evidenced in their program evaluation activities. These evaluation activities are increasingly drawing attention to school and pupil performance, and the findings are being utilized for both program improvement as well as to better establish school and student accountability.

Students Receiving a Free Appropriate Public Education

The first of four purposes established by Part B of the Education of the Handicapped Act (EHA-B) is "to assure that all handicapped children have available to them a free appropriate public education which emphasizes special education and related services designed to meet their unique needs" (Sec. 601(c)). Since school year 1976-77, States have reported the number of handicapped children receiving special education and related services by handicapping condition and age range. This information has helped to determine the extent to which the nation's handicapped children are receiving a free appropriate public education in accordance with the Act.

The enactment of the EHA Amendments in 1983 changed the EHA State reporting requirements. Prior to that child count information was reported by States for age groups three through five, six through 17, and 18 through 21. In school year 1984-85, States were required to report child count information for age groups three through five, six through 11, 12 through 17, and 18 through 21. These data were summarized in the 1986 Congressional Report. Beginning with the 1985-86 school year data for discrete ages, three-year-olds, four-year-olds, etc., were required to be reported by States. This chapter discusses these data along with the count of handicapped children under Chapter 1 of ECIA (SOP); this is a count of children birth to 20 years of age.

This chapter also summarizes data that have been submitted by States since the enactment of P.L. 94-142 that include numbers of personnel employed and needed in the delivery of special education and related services and data on the educational placements of handicapped students, e.g., resource rooms, self-contained special classes, residential facilities, etc. Over the years these personnel data have assisted in understanding personnel shortages and determining the nation's success in responding to these needs. Continuing shortages confirm the importance of consistent collection of data. Data on placements of handicapped children are critical for describing the primary educational settings in which students are served, for examining the implementation of the least restrictive environment requirements, and for assessing State variation in the use of various placement alternatives. The placement information presented for the 1984-85 school year, while consistent with that collected in previous years, reflects revisions to the data. As a result of these revisions, the data now collected are improved over that available in previous reports. The data are not directly comparable, however, so some analyses discussed in previous reports, i.e., year-to-year changes in data, are not included in this report. To facilitate interpretation of these revised data submissions from States, OSEP asked each State to describe methods and procedures used in reporting this information. In the discussions that follow, explanations received from the States are used to assist in understanding the data.

The EHA Amendments mandated other State reporting requirements of EHA. These new data are displayed for the first time in this report and are discussed in this chapter. Demand for these data has been substantial. Among these new requirements are data on handicapped youth exiting school and anticipated services required by these youth, information on special education and related services in need of improvement, and numbers of handicapped children and youth receiving related services. The information on handicapped youth exiting the educational system and anticipated services required by these youth will permit an analysis of the comparative graduation rates among the States and an evaluation of the severity of the dropout problem among handicapped youth; it will also facilitate planning by adult service agencies for transition services. The data on programs and services in need of improvement will be useful in helping direct State and Federal resources to meeting critical needs. Information on numbers of children receiving various related services is critical to understanding who is receiving services and in what magnitude.

Many States did not have data systems in place to collect and provide data for the new requirements of EHA for 1984-85. States were permitted to use estimates for 1984-85 in providing these data. While these data seem to be reasonable and interpretable, very little is known about the level of precision of the State's estimates. In general, the individual States appear to have a significant interest in the data; therefore, the precision of these data is likely to improve considerably over the next few years. Beginning with the 1985-86 data, which will be reported next year, OSEP, working with the States, has improved the definitions and instructions for the data collection form. During the 1986-87 school year, OSEP will be working directly with States to improve data collection procedures and to attempt to ensure greater consistency from State to State in the nature of the data they collect and report.

Number of Students Served

States reported 4,370,244 handicapped children were receiving special education and related services under Chapter 1 of the Education Consolidation and Improvement Act - State Operated Programs (ECIA (SOP)) and EHA-B during school year 1985-86. This number was approximately 0.2 percent higher than the 4,363,031 handicapped children counted by the States and Insular Areas for the 1984-85 school year. As shown in Table 1, there has been an increase in the number of children served under both laws since 1976-77; the cumulative growth in the number of handicapped children counted from school year 1976-77 to 1985-86 was 661,331, an increase of 17.8 percent. Increases in the number of handicapped children served have been smaller each year since the 1980-81 school year; the increase over the past 2 years has been the smallest year-to-year change thus far. (See Appendix Table EA8.)

Variation among States in the number of handicapped students receiving special education and related services, however, is high. Thirty States and Insular Areas reported increases in the number of handicapped children served under

TABLE 1

Number and Change in Number of Children Aged Three to 21 Years Counted Under Chapter 1 of ECIA (SOP) and EHA-B from School Year 1976-77 to 1985-86

School Year	Percent Change in Total Number Served from Previous Year	Total Served	EHA-B	ECIA (SOP)
1985-86	0.2	4,370,244	4,121,104	249,140
1984-85	0.5	4,362,968	4,113,312[a]	249,245
1983-84	1.0	4,341,399	4,094,108	247,291
1982-83	1.5	4,298,327	4,052,595	245,732
1981-82	1.3	4,233,282	3,990,346	242,936
1980-81	3.5	4,177,689	3,933,981	243,708
1979-80	3.0	4,036,219	3,802,475	233,744
1978-79	3.8	3,919,073	3,693,593	225,480
1977-78	1.8	3,777,286	3,554,554	222,732
1976-77	--	3,708,913	3,485,088	223,825

[a] Beginning in 1984-85, the number of handicapped children reported reflects revisions to State data received by the Office of Special Education Programs following the July 1 grant award date, and includes revisions received by October 1. Previous reports provided data as of the grant award date.

Chapter 1 of ECIA (SOP) and EHA-B between 1984-85 and 1985-86, while 26 States and Insular Areas reported a decline in the total number of handicapped children. As a percentage of school enrollment, the number of handicapped children served decreased slightly between 1984-85 and 1985-86; this was the first decrease in the proportion served since child count data have been collected from the States. (See Table 2.) The number of States in which the proportion of students served increased between 1984-85 and 1985-86 was 22, while in 26 States and the District of Columbia the proportion decreased and in two States the proportion remained constant. (See Figure 1.)

Under Chapter 1 of ECIA (SOP), 249,140 students were served in 1985-86; this was a decrease of 579 students or 0.2 percent from 1984-85. The largest proportion of these students were mentally retarded (35.6 percent), followed by emotionally disturbed pupils (17.5 percent). (See Table 3.)

Distribution of Handicapped Children by Age

Table 4 shows the number of children served under EHA-B by age range for 1984-85 and 1985-86. In both years, children aged six through 11 were the largest group of special education students served. In 1985-86, there were 1,966,104 special education students in this age group, representing 47.7 percent of students receiving special education under EHA-B. The second largest group of special education students was those aged 12 through 17. There were 1,697,393 handicapped students aged 12 through 17, representing 41.2 percent of students receiving special education under EHA-B. The number of students aged six through 11 increased by 0.6 percent between 1984-85 and 1985-86, while the number of students aged 12 through 17 decreased 0.5 percent over the same period.

In 1985-86, a total of 196,676 students between 18 and 21 yearas of age received special education services; this was 4.8 percent of students receiving special education under EHA-B. The largest proportion of these students were learning disabled (41.0 percent) and mentally retarded (37.6 percent). From 1978-79 (the first year a separate count of 18- to 21-year-olds was collected) to 1985-86, the number of 18- to 21-year-olds served under EHA-B increased by 92 percent. From 1984-85 to 1985-86 there was an increase of 2.2 percent in the number of 18- to 21-year-old students served.

The number of students aged three through five served increased 0.6 percent from 259,483 students in 1984-85 to 260,931 in 1985-86. In 29 States and Insular Areas the number served increased, while in 26 the number served decreased. For 1985-86, this number represented 6.3 percent of students receiving special education under EHA-B. The number of students aged three through five served under EHA-B has increased 33 percent from 196,223 students in 1976-77.

TABLE 2

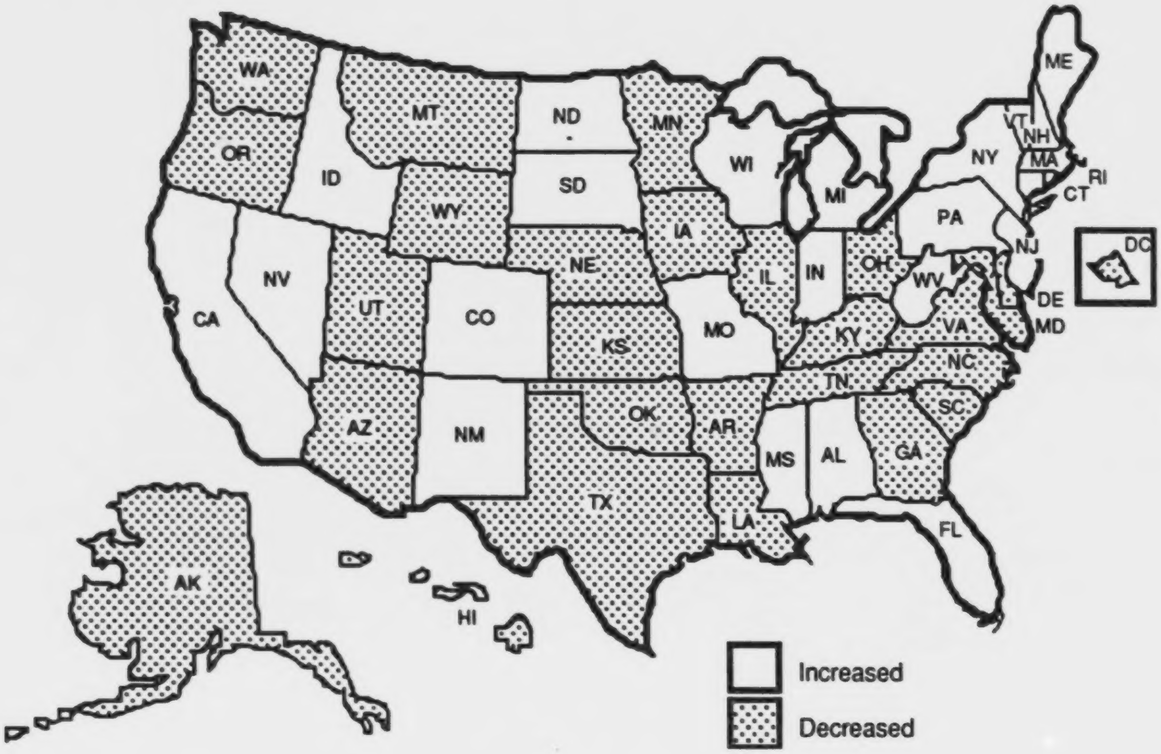
Percentage of School Enrollment Served as Handicapped, by Handicapping Condition, for the 50 States and the District of Columbia During School Years 1976-77, 1984-85, and 1985-86 [a]

Handicapping Condition	1976-77	1984-85	1985-86
Learning Disabled	1.79	4.72	4.73
Speech or Language Impaired	2.84	2.90	2.86
Mentally Retarded	2.16	1.84	1.68
Emotionally Disturbed	0.64	0.96	0.95
Other Health Impaired	0.32	0.18	0.17
Multihandicapped[b]	--	0.18	0.22
Hard of Hearing and Deaf	0.20	0.18	0.14
Orthopedically Impaired	0.20	0.15	0.14
Visually Handicapped	0.09	0.08	0.07
Deaf-Blind[b]	--	0.01	0.01
Total	8.24	11.19	10.97

[a] The percentages represent children from birth to age 20 served under Chapter 1 of ECIA (SOP) and children aged three to 21 years old served under EHA-B as a percentage of the students enrolled in prekindergarten through grade 12.

[b] Data for these categories were not collected in 1976-77.

Figure 1. Change in Proportion of Children Served Under Chapter 1 of ECIA (SOP) and EHA-B Between School Years 1984-85 and 1985-86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Decreased

NOTES: Number of children served is a percent of the students enrolled in fall, 1985 (pre-kindergarten- grade 12).

The proportion of handicapped children reported did not change for Indiana and Nevada.

No enrollment data were available for the Insular Areas.

TABLE 3

Number of Students Served Under Chapter 1 of ECIA (SOP) by Handicapping Condition During School Years 1976-77, 1984-85, and 1985-86

Handicapping Condition	School Year 1976-77	 1984-85	 1985-86
Learning Disabled[a]	-	23,018	24,748
Speech or Language Impaired[a]	-	18,704	21,346
Mentally Retarded	131,487	95,108	88,593
Emotionally Disturbed	30,378	42,799	43,717
Hard of Hearing and Deaf	27,522	23,149	21,960
Multihandicapped[a]	-	17,717	20,408
Orthopedically Impaired	8,425	11,324	10,960
Other Health Impaired	16,095	7,269	7,607
Visually Handicapped	9,925	9,626	8,575
Deaf-Blind[a]	-	1,005	1,226
All Conditions	223,832	249,719	249,140

[a] Data were not collected for these conditions in 1976-77.

TABLE 4

Number and Percent Change in Number of Children Served Under EHA-B During School Years 1984-85 and 1985-86

Age Group	1984-85	1985-86	Number Change	Percent Change
3-5	259,483	260,931	1,448	0.6
6-11	1,954,664	1,966,104	11,440	0.6
12-17	1,706,727	1,697,393	-9,334	-0.5
18-21	192,438	196,676	4,238	2.2
3-21	4,113,312	4,121,104	7,792	0.2

Data are not yet available for the 1985-86 school year on the number of students birth to two years old served by the States, but for 1984-85, a total of 51 States and Insular Areas reported 36,533 handicapped children from birth through two years of age receiving early special education. (See Appendix Table EA10.)

In 1985-86, all States reported the number of children and youth served under EHA-B by individual age years. The additional information allows for more detailed analysis of the handicapped population being served. The patterns of service by handicapping condition and individual age year are discussed below.

Number of Children Being Served by Handicapping Condition and Individual Age Year

Figure 2 depicts the age distribution of all handicapped children and youth aged three through 21 served under EHA-B during the 1985-86 school year. As can be seen in this figure, the number of children served rose with the increase in age from three to eight, as students entered the school system and began to receive services. The number served peaked at age eight and slowly declined from there until age 14, when there was a slight increase. At age 15, the number of children served decreased rapidly as handicapped youth began to leave school.

Number of Learning Disabled Children Counted

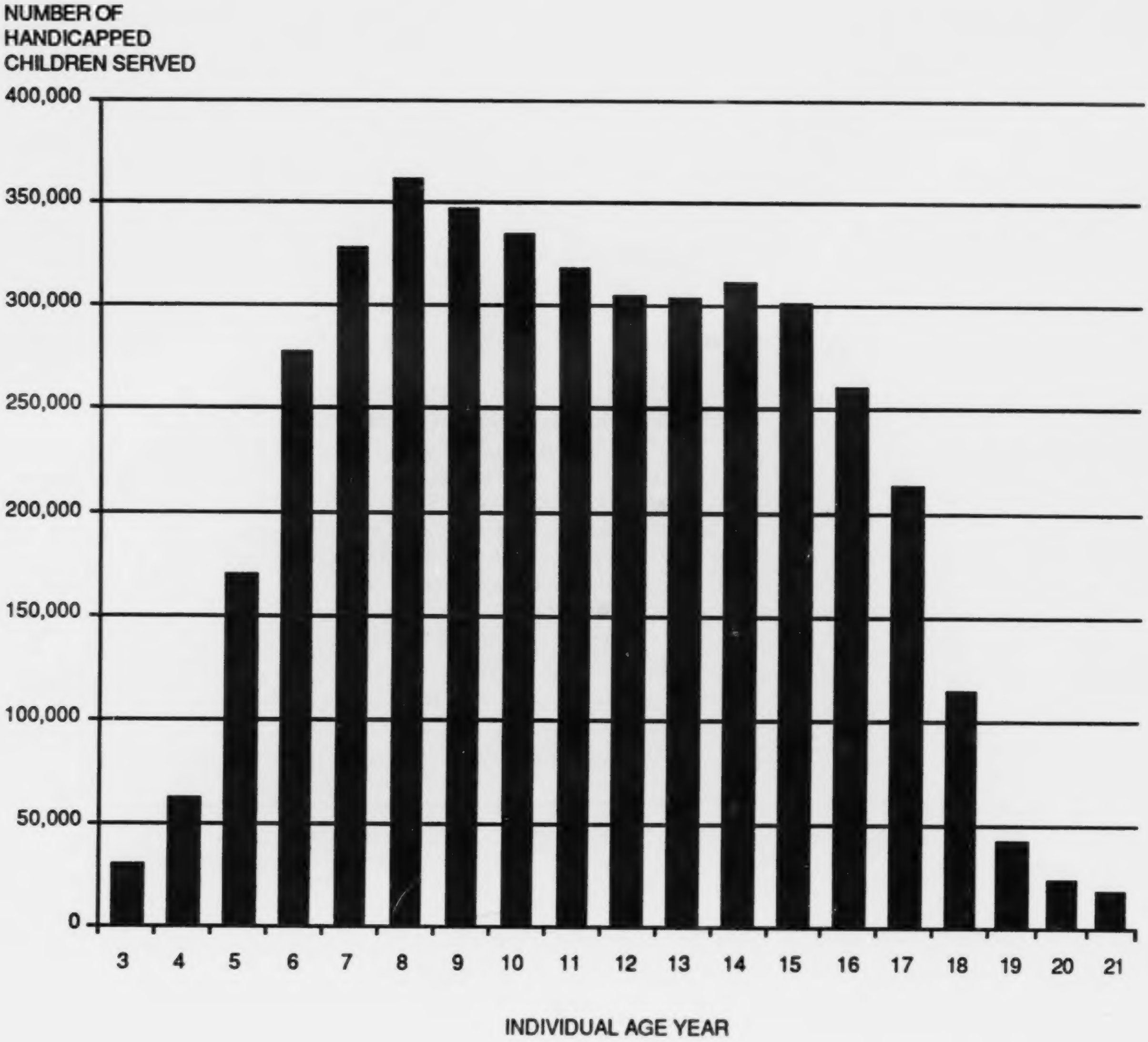
Learning disabled children presently account for 42.8 percent of all children served under Chapter 1 of ECIA (SOP) and EHA-B. The number of children reported as learning disabled grew only 1.8 percent over the last 2 years, increasing from 1,839,292 in 1984-85 to 1,872,339 in 1985-86. The number of States and Insular Areas in which the number of learning disabled students increased between these years was 37, while the number decreased in 18 States and Insular Areas.

Examining the individual age year data for 1985-86, the number of three-, four-, and five-year-olds served by EHA-B increased at a constant rate. The number of learning disabled students served increased significantly with the increase in age from six through 11, while the number of learning disabled students aged 11 through 15 remained fairly constant. After age 15 (as students began to leave the school system), the number of learning disabled students decreased.

Number of Speech or Language Impaired Children Counted

Speech or language impaired children currently account for 25.8 percent of the handicapped population served under Chapter 1 of ECIA (SOP) and EHA-B. The number of children reported as speech or language impaired decreased slightly (0.1 percent) from 1,129,417 in 1984-85 to 1,128,471 in 1985-86. For 28 States and

Figure 2. Number of Handicapped Children Served Under EHA-B During the 1985-86 School Year by Individual Age Year



Insular Areas this number increased; for 28 it decreased. The number of speech or language impaired children has decreased every year since 1976-77 when 1,302,666 students were reported served.

The number of speech or language impaired students served under EHA-B increased dramatically during 1985-86 with the increase in age from age three through seven as students entered the school system and were identified as having speech or language problems. It appears that because students with speech or language problems are identified and served early, and because many of the students' problems are resolved, the number of speech or language impaired students older than age seven served in 1985-86 decreased sharply.

Number of Mentally Retarded Children Counted

Mentally retarded children currently account for 15.7 percent of the children from birth through 20 years old served under Chapter 1 of ECIA (SOP) and children three through 21 served under EHA-B. The number of children reported as mentally retarded decreased by 4.4 percent, from 717,785 in 1984-85 to 686,077 in 1985-86. For 12 States and Insular Areas this number increased; for 44 States and Insular Areas it decreased. In 1976-77 there were 969,547 mentally retarded children; 26 percent fewer students were reported as mentally retarded in 1985-86 than in 1976-77.

In 1985-86, the number of mentally retarded students served under EHA-B increased steadily with the increase in age from ages three to 15. But the trend reversed, and the number of mentally retarded students served after age 15 decreased. One hypothesized reason for the increase in number of children served through age 15 is that 10 years ago, as EHA-B was first being implemented, the students who are now aged 15 were just entering the school system. Initially these first students were identified as mentally retarded. As services expanded and became more comprehensive, it is possible that many of the students who in earlier years might have been labeled mentally retarded were classified and received services under other handicapping conditions.

Number of Emotionally Disturbed Children Counted

Emotionally disturbed children currently account for 8.6 percent of the handicapped population served under Chapter 1 of ECIA (SOP) and EHA-B. The number of children reported as emotionally disturbed grew 1.0 percent, increasing from 373,207 in 1984-85 to 376,943 in 1985-86. For 39 States and Insular Areas this number increased, while for 17 it decreased. The number of emotionally disturbed children has increased 33.2 percent since 1976-77.

The number of students classified as emotionally disturbed under EHA-B rose with the increase in age from ages six to 15. The number of emotionally disturbed children served after age 15 decreased sharply, most probably due to students exiting the school system. As discussed in a subsequent section, large proportions of emotionally disturbed students drop out of school beginning at age 16.

Number of Hard of Hearing and Deaf, Visually Handicapped, and Deaf-Blind Children Counted

Hard of hearing and deaf children currently account for 1.6 percent of the handicapped population served under Chapter 1 of ECIA (SOP) and EHA-B, while visually handicapped and deaf-blind children each account for less than 1 percent of the population. The number of children categorized as hard of hearing and deaf and the number of visually handicapped students each decreased by 4 percent from 1984-85 to 1985-86. The number of deaf-blind children increased 7.0 percent from 1,992 children in 1984-85 to 2,132 children in 1985-86.

The trend in the ages and numbers of children served under EHA-B was similar for both hard of hearing and deaf children and for visually handicapped children. The number of children served increased with the increase in age from three to six as students entered the school system. The number of students with these handicapping conditions served remained fairly constant for those children aged seven through 17. At the age of 18, when students leave school, the numbers of students served decreased.

The trend in the number of deaf-blind students served under EHA-B was similar to those of the numbers of the hard of hearing and deaf children and visually handicapped children: once the children had been identified as deaf-blind, their numbers stayed fairly constant. This is undoubtedly due to the fact that there have been no new rubella epidemics. The deaf-blind children were identified and began to receive services at an earlier age (age three) than the hard of hearing and deaf children, and visually handicapped children; and the number of deaf-blind students remained constant as they continued to require services after students with other handicapping conditions had left the school system (through age 21).

Number of Children with Other Handicapping Conditions Counted

Multihandicapped students constituted 2.1 percent of the handicapped population served under Chapter 1 of ECIA (SOP) and EHA-B in 1985-86, while orthopedically impaired and other health impaired students constituted 1.4 and 1.3 percent, respectively. The number of children counted as multihandicapped under both Chapter 1 of ECIA (SOP) and EHA-B has increased 25 percent from 71,780 children in 1984-85 to 89,701 children in 1985-86. For 33 States and Insular Areas there was an increase in this count of children served. In 20 States and Insular Areas this count decreased. The number of multihandicapped students served has grown 76.8 percent since information first became available on this condition in 1978-79. The number of orthopedically impaired students served under both laws increased 0.3 percent from 58,835 students in 1984-85 to 59,000 students in 1985-86. The number of other health impaired students served under both laws declined 15.9 percent from 69,118 students in 1984-85 to 58,142 students in 1985-86.

The trends of orthopedically impaired, other health impaired, and multihandicapped students by individual age year served under EHA-B in 1985-86 were quite similar. For each of these handicapping conditions, it appears that the number of children served grew with the increase in age from three to seven as students were identified. The number of orthopedically impaired and other health impaired students served decreased slightly from ages eight through 12 and increased from ages 13 to 15, while the number of multihandicapped students decreased.

Related Services Received

The Department is concerned about the consistency of data reported on related services, and its overall utility to the Federal Government, as weighed against the burden placed on States and localities by its collection. The Department will be reviewing alternatives that would provide useful, reliable information on related services while being less burdensome for States and school districts. Given the concern about the consistency of these data, the reader is advised to exercise caution in using the information reported below.

States were asked to record the number of handicapped children receiving related services in the 1984-85 school year. They were instructed to record each related service received by handicapped children based on the Child and Youth Counts of October 1, Chapter 1 of ECIA (SOP), and of December 1, EHA-B. That is, the number of related services reported is a duplicated count of students because the children frequently receive more than one related service. (Appendix Table EB1 is a summary of the number of handicapped children receiving related services for all handicapping conditions by State.)

States reported that the total duplicated count of handicapped children aged three to 21 receiving related services was 5,797,160. The children receiving the most related services were those with learning disabilities; 2,040,658 services were provided for the learning disabled. (See Table 5.) Since the learning disabled account for approximately half of the students served as handicapped, these figures are expected. The second greatest number of services 1,241,052 went to the mentally retarded. Third were the speech or language impaired children with 966,832 services; and fourth were the emotionally disturbed, with 707,979 services. The number of students receiving related services dropped considerably for multihandicapped (229,177), hard of hearing and deaf (179,570), other health impaired (165,549), orthopedically impaired (133,208), and visually handicapped students (61,570). Deaf-blind children had the smallest number of services 20,410 reported. Given the relative proportions these students represent of the combined

TABLE 5

Total Number of Related Services Received by Students by Handicapping Condition During School Year 1984-85

Handicapping Condition	Total Number of Services Received
Learning Disabled	2,040,658
Mentally Retarded	1,241,052
Speech or Language Impaired	966,832
Emotionally Disturbed	707,979
Multihandicapped	229,177
Hard of Hearing and Deaf	179,570
Other Health Impaired	165,549
Orthopedically Impaired	133,208
Visually Handicapped	61,570
Deaf-Blind	20,410
All Conditions[a]	5,797,160

[a] The total number of services for all conditions does not equal the sum of services by handicapping condition because it includes counts of services that were not categorized by handicapping condition.

EHA-B and Chapter 1 of ECIA (SOP) child counts, these numbers are not surprising.

Transportation was the related service received by the greatest number of handicapped students; 1,007,020 students received transportation. (See Table 6.) It is not surprising that over one million students are receiving transportation as a related service since, under the EHA regulations, transportation is defined as travel to and from school and between schools, travel in and around school buildings, and use of specialized equipment, if required to provide special transportation for handicapped children. Diagnostic services were received by 774,803 students, psychological services by 772,633 students. Speech or language pathology, school social work services, school health, counseling services, and recreational services were received by approximately 500,000 students each. The States reported that 188,358 students received audiological services; 141,030 received occupational therapy; and 128,902 received physical therapy. In addition, 203,504 students received related services other than those specified on the data collection form.

TABLE 6

Total Number of Related Services Received by Students by Type of Related Service During School Year 1984-85

Related Service	Total Number of Services Received
Transportation Services	1,007,020
Diagnostic Services	774,803
Psychological Services	772,633
Speech/Language Pathology	667,161
School Social Work Services	524,146
School Health Services	498,824
Counseling Services	482,970
Recreation Services	407,809
Other Related Services	203,504
Audiological Services	188,358
Occupational Therapy	141,030
Physical Therapy	128,902
All Related Services	5,797,160

Table 7 shows the number and proportion of related services received by students with each handicapping condition. For mentally retarded students, transportation services constituted 20 percent of all related services received. Speech or language pathology accounted for approximately 17 percent and diagnostic therapy for 11 percent of all services received. For speech or language impaired and visually handicapped students, diagnostic services were the most frequently received service. For hard of hearing and deaf students, audiological services were received most often, while other related services were the most frequently received service category for deaf-blind students. For emotionally disturbed students, the most frequently received services were psychological services (21 percent), followed by transportation services (18 percent), school social work services (14 percent), and counseling services (14 percent). For orthopedically impaired and other health impaired students, physical therapy (19 percent for orthopedically impaired and 18 percent for other health impaired) was the most frequently received related service. For multihandicapped students, transportation services (16 percent) were the most frequently received service category.

TABLE 7

Number and Percent of Related Services Received by Students for Each Handicapping Condition During School Year 1984-85[a/]

Handicapping Condition	Type of Related Services	Number	Percent
Mentally Retarded	Transportation Services	253,474	20
	Speech/Language Pathology	209,632	17
	Diagnostic Services	139,462	11
	Psychological Services	139,136	11
Speech or Language Impaired	Diagnostic Services	193,021	20
	Transportation Services	158,871	16
	School Health Services	105,093	11
	Recreation Services	98,037	10
	Other Related Services	93,914	10
Visually Handicapped	Diagnostic Services	13,230	21
	Transportation Services	9,681	16
Emotionally Disturbed	Psychological Services	146,124	21
	Transportation Services	125,538	18
	School Social Work Services	100,201	14
	Counseling Services	99,233	14
	Diagnostic Services	74,752	11
Orthopedically Impaired	Physical Therapy	25,407	19
	Transportation Services	22,119	17
	Occupational Therapy	20,698	16
Other Health Impaired	Physical Therapy	29,380	18
	Transportation Services	25,478	15
	Recreation Services	24,015	14
Learning Disabled	Psychological Services	346,628	17
	Transportation Services	338,329	17
	Diagnostic Services	289,667	14
	Speech/Language Pathology	281,305	14
	School Social Work Services	203,316	10

Table 7 (continued)

Handicapping Condition	Type of Related Services	Number	Percent
Deaf-Blind	Other Related Services	8,585	42
	Transportation Services	4,262	21
Multihandicapped	Transportation Services	36,759	16
	Speech/Language Pathology	36,338	16
	Recreation Services	25,416	11
	Physical Therapy	24,395	11
	Occupational Therapy	23,323	10
Hard of Hearing and Deaf	Audiological Services	42,249	24
	Speech/Language Pathology	32,419	18
	Transportation Services	26,642	15
	Diagnostic Services	23,233	13

a/ Only those services that constituted 10 percent of the total number of services received by that handicapping category of children and youth are included.

The number of services received by students was greater than the number of students served under Chapter 1 of ECIA (SOP) and EHA-B for all categories of handicapping conditions except for speech or language impairments. (See Table 8.) While 1,129,417 speech impaired children were served under Chapter 1 of ECIA (SOP) and EHA-B, 966,832 related services were provided. Only 1,992 deaf-blind children were served under both laws yet 20,410 related services were provided to deaf-blind children; this comes to more than 10 related services per child. For all conditions combined, each child received approximately 1.3 related services. The data appear to substantiate the view that the number of students receiving related services is a function of the severity of the student's condition.

Least Restrictive Environment

The 1983 Amendments to the Education of the Handicapped Act direct the Secretary of Education to obtain data, on at least an annual basis, on the number of handicapped children in each State by handicapping condition who are participating in regular educational programs, in separate classes, separate schools or facilities, or public or private residential facilities or who have otherwise been removed from the regular educational environment. The data collected on where students receive special education were changed in 1984-85 because of the Amendments and previous experience with the data reported on the setting in which children receive special education and related services. In 1983-84, data were collected for children aged three to five, six to 17, and 18 to 21 being served in four environments: regular classes, separate classes, separate schools, and other educational environments. In 1984-85, data were collected for an additional age grouping and three more environments; data were collected on the number of children and youth aged three to five, six to 11, 12 to 17, and 18 to 21 receiving special education and related services in the following environments:

- regular classes;
- resource rooms;
- separate classes;
- public separate school facilities;
- private separate school facilities;
- public residential facilities;
- private residential facilities;
- correction facilities; and
- homebound or hospital environments.

40

TABLE 8

Comparison of Number of Students Served Under Chapter 1 of ECIA (SOP) and EHA-B and the Number of Related Services Provided by Handicapping Condition During School Year 1984-85

	Number of Children Served Under Chapter 1 of ECIA (SOP) and EHA-B	Number of Related Services Provided	Services Per Child
Learning Disabled	1,839,292	2,040,658	1.11
Speech or Language Impaired	1,129,417	966,832	0.86
Mentally Retarded	717,785	1,241,052	1.73
Emotionally Disturbed	373,207	707,979	1.90
Hard of Hearing and Deaf	71,230	179,570	2.52
Multihandicapped	71,780	229,177	3.19
Orthopedically Impaired	58,835	133,208	2.26
Other Health Impaired	69,118	165,549	2.40
Visually Handicapped	30,375	61,570	2.03
Deaf-Blind	1,992	20,410	10.25
All Conditions[a/]	4,363,031	5,797,160	1.32

[a/] The number of services for all conditions does not equal the sum of services by handicapping condition because it includes counts of services reported by the States that were not categorized by handicapping condition.

State personnel responsible for submitting annual data to OSEP were asked to assess whether their 1983-84 and 1984-85 LRE data were comparable. Preliminary results show that while many States felt that the data over the years were comparable, the environments under which they reported the children differed from one year to the next. For example, most States that reported children placed in regular classes in 1983-84 reported that these children had been placed in both regular and resource classes in 1984-85; however, some States did not report these children in resource rooms in 1984-85, while other States reported some of these children in correction facilities, homebound/hospital environments, or separate classes. As a result, comparisons between numbers of children placed by environment from 1983-84 to 1984-85 are not possible.

During the 1984-85 school year, the majority of handicapped children received special education and related services in settings with nonhandicapped students. Nearly 27 percent, or 1,161,157 children and youth, received special education primarily in regular classes. An additional 42 percent received special education and services primarily in resource rooms, while nearly 24 percent received education and services in separate classes within a regular education building. These three settings accounted for almost 93 percent of handicapped placements; thus, most handicapped students were being educated with their nonhandicapped peers. The remaining handicapped children were educated in public separate day school facilities (3.5 percent), private separate day school facilities (2.1 percent), public residential facilities (1.0 percent), private residential facilities (0.4 percent), correctional facilities (0.3 percent), and homebound/hospital environments (0.8 percent). (See Appendix Table EC1.)

While the data show that the regular classroom and resource room are the primary settings in which States place their handicapped students, the extent to which these children are placed in such settings varies by handicapping condition. Table 9 shows that most learning disabled and speech or language impaired students were placed either in regular classes or resource rooms (77 percent and 91 percent, respectively). Only 5 percent of mentally retarded students were placed in regular classes, and 29 percent were placed in resource rooms. Nationally, 50 percent of mentally retarded students are served in separate classes. States also reported that only 12 percent of their emotionally disturbed students were placed in regular classes; approximately 34 percent of the emotionally disturbed students were placed in resource rooms and another 34 percent in separate classes. Hard of hearing and deaf students were primarily placed in four environments; these included separate classes (31 percent), resource rooms (23 percent), regular classes (21 percent), and public residential facilities (11 percent). States reported that multihandicapped students were primarily placed in separate classes (43 percent); an additional 18 percent were placed in public separate day facilities, and 13 percent were placed in resource rooms. Nearly 10 percent of the multihandicapped students were placed in private separate day facilities. Both orthopedically impaired and other health impaired students primarily received their education in separate classes, resource rooms, and regular classes. A fairly high percentage of students with these handicapping conditions are served in home/hospital environments (8 percent of orthopedically impaired and 11 percent of other health impaired). Visually handicapped students

TABLE 9
Percent of Handicapped Children and Youth Served in Nine Educational Environments by Handicapping Condition During School Year 1984-85

Handicapping Condition	Regular Class	Resource Room	Separate Class	Public Separate Facility	Private Separate Facility	Public Residential Facility	Private Residential Facility	Correctional Facility	Homebound/ Hospital
Learning Disabled	16.26	60.68	20.84	1.11	0.77	0.03	0.06	0.16	0.08
Speech or Language Impaired	64.80	26.33	4.90	0.97	2.46	0.03	0.03	0.03	0.46
Mentally Retarded	4.80	28.83	52.37	8.29	2.10	2.52	0.40	0.19	0.50
Emotionally Disturbed	11.79	34.22	33.34	8.57	4.80	1.69	2.41	1.59	1.59
Hard of Hearing and Deaf	21.03	23.49	31.03	7.23	4.83	10.67	1.09	0.10	0.53
Multihandicapped	2.70	13.48	42.72	17.61	9.70	6.07	2.51	0.35	4.85
Orthopedically Impaired	18.27	20.62	33.42	12.99	5.50	0.80	0.72	0.03	7.65
Other Health Impaired	23.47	25.44	32.69	3.97	1.94	0.72	0.56	0.02	11.18
Visually Handicapped	32.55	29.55	18.80	4.05	3.25	9.80	1.04	0.21	0.74
Deaf-Blind	4.36	15.02	22.72	19.21	4.88	27.39	4.36	0.04	2.01
All Conditions	26.73	41.61	23.76	3.47	2.08	0.95	0.39	0.25	0.75

were placed in regular classes (33 percent), resource rooms (30 percent), and separate classes (19 percent); an additional 10 percent of visually handicapped students were placed in public residential facilities. Finally, deaf-blind students were placed in public residential facilities (27 percent), separate classes (23 percent), public separate day facilities (19 percent), and resource rooms (15 percent).

There were differences among age groups as to where handicapped children and youth received special education in the 1984-85 school year. (See Table 10.) Of preschoolers aged three to five, States enrolled 36.8 percent of their children in regular classes; 23.5 and 22.5 percent of the children were enrolled in separate classes and resource rooms, respectively. Of elementary students aged six to 11, States enrolled 39.7 percent of their children in resource rooms and 35.4 percent in regular classes; an additional 20 percent were enrolled in separate classes. Of older children and youth aged 12 to 17 and 18 to 21, the States' primary placement location was resource rooms; 47.9 percent of students aged 12 to 17 and 34.9 percent of those 18 to 21 were placed in resource rooms. The second highest percent of older students were served in separate classes; 27.3 percent of 12 to 17-year-olds and 32.0 percent of those from 18 to 21 were receiving special education in separate classes. Finally, the regular classroom was the third most populous environment for students aged 12 to 21; 17.0 percent of 12 to 17-year-olds and 11.4 percent of 18 to 21-year-olds were educated in regular classrooms in 1984-85. Thus older students were less likely to be placed in regular classrooms and more likely to be placed in resource rooms. Handicapped youth in the older group are more likely to be more severely handicapped since moderately and mildly handicapped students are more likely to graduate. The proportions of youth reported being served in special classes and resource rooms are, therefore, not surprising.

In conclusion, changes in the LRE annual data forms have revealed placement trends that had never before been nationally documented. For example, 27 percent of the handicapped children receive services in regular classes and 42 percent are primarily served in resource rooms.

Personnel Employed and Needed

To meet the goal of providing free and appropriate educational opportunity to all handicapped children, trained personnel are needed to serve this population. This section provides numbers of special education teachers and other personnel employed and needed by States in school year 1984-85 and compares these data with numbers collected previously. This information differed in several ways from information collected previously.

TABLE 10

Number and Percent of all Handicapped Children and Youth Served by Age Group in Nine Educational Environments During School Year 1984-85

	Age Group							
	3-5 Years		6-11 Years		12-17 Years		18-21 Years	
Environment	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Regular Classes	107,952	36.8	726,308	35.4	300,523	17.0	26,374	11.4
Resource Room	65,990	22.5	813,481	39.7	847,254	47.9	80,726	34.9
Separate Classes	68,939	23.5	406,397	19.8	482,939	27.3	74,023	32.0
Public Separate Facility	21,348	7.3	46,349	2.3	61,506	3.5	21,752	9.4
Private Separate Facility	20,302	6.9	34,928	1.7	28,170	1.6	7,071	3.1
Public Residential Facility	2,202	0.7	10,715	0.5	16,871	1.0	11,524	5.0
Private Residential Facility	607	0.2	3,902	0.2	10,044	0.6	2,419	1.0
Correctional Facility	3	0	744	0	6,645	0.4	3,559	1.5
Homebound/ Hospital	6,324	2.2	7,263	0.4	15,375	0.9	3,603	1.6

First, counts of special education teachers were collected by the setting in which the teachers provided services. For school year 1984-85, States reported separate counts of teachers employed and needed in separate classes, resource rooms, itinerant/consulting positions, and home-hospital settings. (See Appendix Tables ED1 and ED2.)

Second, as in previous years, special education teachers were reported in full-time equivalency (FTE) of assignment and were categorized by the handicapping condition of the children they served. Unlike previous years, counts of noncategorical teachers, working teachers with children of different handicapping conditions were not collected separately. Instead, the time teachers worked was apportioned and counted according to the handicapping conditions served.

Third, the categories of personnel other than special education teachers who serve handicapped children were modified. Data requirements for school year 1984-85 called for counts of counselors and State educational agencies (SEA) supervisors/administrators, counts that were not previously collected separately. Also, counts of speech pathologists were not collected separately; these counts were included with those of teachers of the speech or language impaired. The remaining categories of personnel were unchanged.

Finally, States were for the first time required to provide two sets of information on the number of personnel needed. For one set of data, States were to provide counts of personnel needed for the 1984-85 school year. Included in these figures were:

- the number of vacancies that occurred from July 1, 1984, through February 1, 1985, even if they were subsequently filled; and
- the number of additional personnel who were needed from July 1, 1984, through February 1, 1985, to fill positions occupied by persons who were not appropriately and adequately prepared or trained.

For the second set of data, States were to provide counts of additional personnel needed to provide improved services.

States reported that the number of special education teachers employed increased between 1983-84 and 1984-85. In comparisons of data for these years, counts of speech pathologists were added to counts of special education teachers for 1983-84 to make these data comparable to those for 1984-85. With this adjustment, the number of special education teachers increased from 268,629 to 274,519, an increase of 2 percent. Although counts of special education teachers were reported according to teaching environments for 1984-85, responses to OSEP's follow-up effort indicated that these counts were comparable to counts collected previously; i.e., counts of home-hospital teachers were typically subsumed under the total special education teacher counts.[1]

For the 10 handicapping conditions served by special education teachers employed, seven categories increased in the number employed from 1983-84 to 1984-85 while three categories decreased. The number of teachers employed increased for the following handicapping categories: mentally retarded, learning disabled, emotionally disturbed, multihandicapped, speech impaired, hard of hearing and deaf, and other health impaired. The number of teachers employed decreased for the following categories: orthopedically impaired, visually handicapped, and deaf-blind.

Generally, for the 1984-85 school year, the increases and decreases in the numbers of special education teachers employed by category did not correspond to changes in counts of children served by handicapping conditions. For example, the increase in the numbers of teachers of the mentally retarded was accompanied by a decrease in the number of students reported in this category. This may be related to the elimination of the noncategorical option from the reporting form and changing definitions and policies at the State level in 1984-85.

The data show reduced numbers of special education teachers in some handicapping categories during 1984-85; however, 53 States and Insular Areas reported that 22,852 additional teachers were needed to fill vacancies and replace uncertified staff. As shown in Table 11, the categories of special education teachers reported by States as the most needed paralleled the relative prevalence of handicapping conditions. Specifically, States reported that the greatest proportional increase needed was for teachers to serve learning disabled, mentally retarded, emotionally disturbed, and speech or language impaired students. These four categories accounted for 84 percent of all teachers needed and for 93 percent of students served under Chapter 1 of ECIA (SOP) and EHA-B. Twelve percent of the teachers were needed for the other health impaired, hard of hearing and deaf, and multihandicapped, while 5 percent of all students served were so categorized. Teachers needed to serve visually handicapped, orthopedically impaired, and deaf-blind together constituted less than 3 percent of all teachers needed, while 2 percent of the students served had these handicapping conditions.

The total number of personnel other than special education teachers employed increased between 1983-84 and 1984-85. (See Table 12.) In making comparisons between these two years, counts of speech pathologists were omitted from the 1983-84 data because these counts were not collected separately in 1984-85. Also, counts of counselors were omitted from the 1984-85 figures because, based on responses from OSEP's follow-up effort, most States did not report counselors for previous years. Counts of SEA supervisors/administrators, however,

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[1] See discussion of OSEP's information follow-up effort done in conjunction with this report in the introduction of this chapter.

TABLE 11

Number of Special Education Teachers Employed and Needed by Handicapping Condition During School Year 1984-85[a]

Handicapping Condition	Employed	Needed	Percent Needed as a Percent of Employed	Percent of Total Needed
Learning Disabled	102,395	7,800	7.6	34.1
Mentally Retarded	61,832	4,671	7.6	20.4
Emotionally Disturbed	32,027	4,322	13.5	18.9
Speech or Language Impaired	36,612	2,511	6.9	11.0
Hard-of-Hearing and Deaf	7,992	773	9.7	3.4
Multihandicapped	8,637	618	7.2	2.7
Orthopedically Impaired	4,240	243	5.7	1.1
Other Health Impaired	10,445	1,299	12.4	5.7
Visually Handicapped	2,995	296	9.9	1.3
Deaf-Blind	396	38	9.6	0.2
Total teachers[b]	274,519	22,852	8.4	98.8

[a] Personnel needed included:
(1) number of vacancies that occurred; and
(2) number of additional personnel needed to fill noncertified or nonlicensed staff.

[b] The number of total teachers does not equal the sum of teachers by handicapping condition because the total includes counts of teachers not categorized by the States by handicapping condition. Percentages are based on data provided by handicapping condition; that is, the total number employed is 267,571 and the total number needed is 22,571.

TABLE 12

Number of Special Education Personnel Other Than Teachers Employed During School Years 1983-84 and 1984-85[a]

Type of Personnel	1983-84	1984-85	Percent Change in Number Employed	Percent of Total Employed 1984-85
Teacher aides	105,394	112,330	6.6	52.3
Other non-instructional staff[b]	41,353	39,593	-4.3	18.4
Psychologists	14,811	16,249	9.7	7.6
Supervisors/administrators	11,846	13,841	16.8	6.4
School social workers	7,586	8,027	5.8	3.7
Diagnostic staff	6,562	6,790	3.5	3.2
Counselors	-	6,284	-	-
Vocational education teachers	5,781	5,339	-7.6	2.5
Physical education teachers	3,694	3,377	-8.6	1.6
Occupational therapists	2,488	2,886	16.0	1.3
Physical therapists	1,958	2,234	14.1	1.0
Work-study coordinators	2,678	1,515	-43.4	0.7
Audiologists	773	966	25.0	0.4
Supervisors/administrators (SEA)	-	925	-	0.4
Recreational therapists	593	616	3.9	0.3
All staff[c]	205,517	226,021	6.9	99.8

[a] Personnel needed included:
(1) number of vacancies that occurred;
(2) number of additional personnel needed to fill noncertified or nonlicensed staff.

[b] Includes staff involved in health services (nurses, psychiatrists, etc.), food service, maintenance, pupil transportation, etc.

[c] The number of all staff does not equal the sum of personnel by type of personnel because the number of all staff includes counts that were not reported by type of personnel. For the purpose of comparing 1983-84 and 1984-85 data for all staff, data were adjusted; that is, counts of counselors were not included in the 1984-85 count since these data were not collected for 1983-84. The adjusted total for 1984-85 is 219,737.

were included because most States, again according to OSEP's follow-up, subsumed this count within other personnel categories in previous years. The adjusted totals for numbers of personnel other than special education teachers employed were 205,517 in 1983-84 and 219,737 in 1984-85, an increase of 7 percent.

Categories of personnel employed that increased over the two years included teachers' aides, psychologists, school social workers, diagnostic staff, occupational therapists, physical therapists, audiologists, and recreational therapists. The category of supervisors/administrators, labeled simply supervisors in 1983-84, also increased. The States and Insular Areas reported 925 SEA supervisors/administrators employed. Of personnel other than special education teachers, fewer physical education teachers, work-study coordinators, and other non-instructional staff were employed in the 1984-85 school year than in 1983-84.

Fifty-five States and Insular Areas indicated that an increase of 8,144 staff in all categories of personnel other than special education teachers was needed to fill vacancies and replace noncertified staff in 1984-85. Table 13 shows this need relative to the number employed for each category. In proportion to the number of personnel employed, physical therapists and occupational therapists were the most needed personnel, followed by SEA supervisors/administrators.

Based on the responses received from 55 States and Insular Areas, most special education teachers (47 percent) provided services in special classes. Thirty-seven percent of special education teachers provided services in resource rooms. In the remaining two environments, itinerant/consulting and home-hospital, 13 percent of special educators provided services in itinerant/consulting environments and 3 percent in home-hospital environments.

Responses from 53 States and Insular Areas indicated that 47 percent of personnel needed to fill vacancies and replace noncertified and nonlicensed staff were needed for special classes. Thirty-nine percent were needed to provide services in resource rooms. Finally, 12 percent were needed to provide services as itinerant/consulting teachers and 2 percent as home-hospital teachers. These data indicate that teachers are needed in almost exactly the same proportion in each setting as those in which they are currently employed.

Youth with Handicapping Conditions Exiting from School

As a result of the EHA amendments of 1983, OSEP began collecting data on the number of youth with handicaps who exited from school. Data were first collected for the 1984-85 school year; they represent the number of youth who received special education and related services during the previous school year but are no longer receiving educational services. The State data were reported according to the reason for exit, for each handicapping condition, and for each age beginning at 16. The exiting reasons for which data were collected were: graduation with diploma, graduation with a certificate of completion, reaching the

TABLE 13

Number of Special Education Personnel Other Than Teachers Employed and Needed During School Year 1984-85[a]

Type of Personnel	Employed	Needed	Percent Needed of Employed	Percent of Total Needed
Teacher aides	112,330	4,086	3.6	50.2
Other non-instructional staff[b]	39,593	835	2.1	10.3
Psychologists	16,249	586	3.6	7.2
Supervisors/administrators	13,841	474	3.4	5.8
School social workers	8,027	397	4.9	4.9
Diagnostic staff	6,790	344	5.1	4.2
Counselors	6,284	158	2.5	1.9
Vocational education teachers	5,339	273	5.1	3.4
Physical education teachers	3,377	172	5.1	2.1
Occupational therapists	2,886	293	10.2	3.6
Physical therapists	2,234	284	12.7	3.5
Work-study coordinators	1,515	55	3.6	0.7
Audiologists	966	62	6.4	0.8
Supervisors/administrators (SEA)	925	73	7.9	0.9
Recreational therapists	616	42	6.8	0.5
All staff[c]	226,021	8,144	3.7	100.0

[a] Personnel needed included:
(1) number of vacancies that occurred;
(2) number of additional personnel needed to fill noncertified or nonlicensed staff.

[b] Includes staff involved in health services (nurses, psychiatrists, etc.), food service, maintenance, pupil transportation, etc.

[c] The number of all staff does not equal the sum of personnel other than teachers by type of personnel because the number of staff includes counts of personnel that were not reported by type of personnel. Percentage needed of employed for all staff is only based on data provided by personnel type; that is, the total number employed is 220,972 and the total number needed is 8,134.

maximum age for which services are provided in the State, dropping out of school, and other. The "other" category included students who died, as well as those who were no longer receiving special education services but whose exiting reason was not known (e.g., when someone does not enroll in school the next year but it is not known whether the student has moved away or dropped out).

Number and Percent of Handicapped Youth Who Exited

A total of 211,673 handicapped youth between the ages of 16 and 21 were reported by States to have exited from school during the 1984-85 school year. (See Appendix Table EE1.) As seen in Table 14, the largest group of these students graduated with diplomas; however, this group represented just 39 percent of the total number exiting. Another 15 percent of handicapped youth who exited graduated from high school with a certificate of completion, yielding a total of 54 percent who graduated. Overall, 4 percent of the exiting youth left school because they reached the maximum age, which could be any age from 18 through 25, depending on the State. The Seventh Annual Report to Congress provides a chart of State age mandates. According to this chart, 27 States and the District of Columbia had mandates to serve handicapped youth 21 years of age and older if they had not graduated from high school.

Data reported by States show an overall dropout rate of 21 percent. However, this figure reflects an estimate of those who were actually known to have dropped out and does not include youth who simply stopped coming to school or whose status was unknown. Undoubtedly, a substantial proportion of the "other" category includes students who are no longer in school and have neither graduated nor reached the maximum age. Therefore, the dropout figure probably exceeds 21 percent.

Significant variation in the reason for exit exists among youth with different handicapping conditions. For example, 57 percent of the deaf and hard of hearing youth graduated with a diploma, and a total of 72 percent graduated. Contrast this with 17 percent of the multihandicapped who receive diplomas and a 40 percent total who graduated. Notable are the data indicating that 23 and 24 percent of the multihandicapped and deaf-blind, respectively, age-out of secondary school while no other handicapping condition exceeds 7 percent. The reported dropout figures vary from a low of 11 percent for orthopedically impaired youth to a high of 29 percent for the emotionally disturbed. The "other" category for the severely emotionally disturbed is also high, suggesting that the percentage of emotionally disturbed students who leave school without completing a program may be substantially higher than 29 percent.

The data for each discrete age, beginning at 16 (see Table 15), reveal that the largest number of students exit at age 18, with more than half of those who exit at 18 graduating with diplomas. The vast majority of handicapped youth have exited from secondary school by the age of 19. Not surprisingly, a large proportion of youth drop out at the age of 16. After age 17, the percent of youths dropping out decreases substantially. Although a number of States have

TABLE 14
Number and Percent of Students 16 Years and Older Exiting the Educational System by Handicapping Condition and Basis of Exit During School Year 1984-85a/

Handicapping Condition	Basis of Exit: Graduation with Diploma #	%	Graduation with Certificate #	%	Age-Out #	%	Dropout #	%	Other #	%	Total #
Learning Disabled	47,943	47	11,962	12	689	1	19,651	19	16,813	17	100,203
Mentally Retarded	18,593	30	14,151	23	4,588	7	14,162	23	8,833	14	61,703
Emotionally Disturbed	7,161	28	2,689	11	794	3	7,396	29	7,016	28	25,245
Speech or Language Impaired	3,830	43	1,253	14	223	3	1,505	17	1,871	21	8,860
Hard of Hearing and Deaf	2,338	57	605	15	141	3	486	12	474	12	4,101
Other Health Impaired	938	23	639	16	253	6	511	13	1,045	26	4,049
Multihandicapped	528	17	710	23	738	23	624	20	502	16	3,140
Orthopedically Impaired	1,205	43	293	10	193	7	318	11	665	24	2,791
Visually Handicapped	707	50	222	16	104	7	194	14	159	11	1,407
Deaf-Blind	43	25	43	25	41	24	28	16	18	10	174
All Conditions	83,286	39	32,567	15	7,764	4	44,875	21	37,396	18	211,673

a/ Two States reported exiting totals by handicapping condition only; no data were provided by basis of exit. The percentages reported on this table are based on the total number of students exiting; therefore, percentages for each handicapping condition will not sum to 100 percent nor will the numbers sum across to the total.

TABLE 15

Number and Percent of Students Exiting the Educational System by Age and Basis of Exit During School Year 1984-85

	Basis of Exit											
Age	Graduated with Diploma		Graduated with Certificate		Reached Maximum Age		Dropped Out		Other		Total	
	#	%	#	%	#	%	#	%	#	%	#	%
16	563	2	597	3	65	<1	10,046	43	10,705	46	23,360	100
17	15,192	35	2,978	7	85	<1	12,272	28	11,143	26	43,116	100
18	38,107	57	9,153	14	292	<1	10,143	15	7,887	12	66,969	100
19	21,074	58	6,668	18	80	<1	4,928	13	2,866	8	36,625	100
20	4,949	38	3,756	29	291	2	2,135	16	1,519	12	13,062	100
21	3,401	24	3,334	23	5,516	38	1,090	8	843	6	14,331	100
Total[a]	83,286	39	32,567	15	7,764	4	44,875	21	37,396	18	211,673	100

[a] One State reported only a total number of students exiting; i.e., no data for individual ages were reported. In addition, two States reported exiting totals by handicapping condition only; no data were provided by basis of exit. The percentages reported on this table are based on the total number of students exiting; therefore, percentages for each handicapping condition will not sum to 100 percent nor will the numbers sum across to the total.

maximum ages for providing special education that are lower than 21, the data indicate that very few youth age-out prior to age 21. A possible interpretation of these data is that most States may permit handicapped youth to remain in school through age 21 even if their maximum ages are less than 21.

In summary, these 1984-85 exiting data from the States provide the first opportunity to examine national figures on the number of handicapped youth who exit from secondary school. Although these initial data are estimates that must be considered with some caution, they provide some evidence of a sizable number of handicapped youth who drop out, particularly among the seriously emotionally disturbed population. Alternatively, significant numbers of youth, particularly among those with certain handicapping conditions, appear to be successfully graduating from secondary school. In future years, as the quality of data improves, these data will provide one useful measure for gauging the success of our nation's schools in serving handicapped youth, for determining the extent to which appropriate measures have been implemented for solving the dropout problem, and for evaluating how many handicapped youth who may require continuing services from adult agencies.

Anticipated Services

Under the 1983 Amendments to EHA, OSEP was required to provide data to the Congress on the services students exiting the educational system would need in the following year. This requirement was intended to provide information for adult service agencies on the number of services that would need to be provided; these data were to be used in State plans of State disability councils and State vocational rehabilitation agencies. For the 1984-85 school year, OSEP required that the SEAs provide data on anticipated services by handicapping condition and age. That is, individual age year data were required for youth aged 16 to 22, and a total was required for three- to 15-year-olds. Table 16 presents the number of services all States and Insular Areas anticipated would be needed for students aged 16 and older who exited the school system in 1984-85. (See Appendix Table EF1 for a State-by-State count of the services anticipated as being needed by handicapping condition.)

Based on responses received from 50 States and Insular Areas approximately 461,500 separate services were anticipated to be needed in 1985-86.[2] The largest number of needed services were vocational/training services; this service type made up approximately 16 percent (74,930) of the anticipated services. Counseling/guidance and vocational placement services each constituted 14 percent of the services. Evaluation of vocational rehabilitation services constituted about 12 percent of the services. Transportation, technological aids, physical/mental restoration, residential living, interpreter services, reader services, maintenance, and other services were each less than 5 percent of the total number of services anticipated.

For each handicapping condition, Table 17 presents those services that were most frequently anticipated. (Only those services that comprised 10 percent or more of the total number of needed services for each handicapping condition are included in the table.) For each condition, except the deaf-blind and multihandicapped, vocational placement services, evaluation of vocational rehabilitation services, and vocational/training services were frequently needed. The other types of services anticipated to be needed differed by handicapping condition as did the number of services prominently needed. For the visually

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[2] The State of Illinois provided only a total count of students needing services (7,074); this count is not included in the total number of anticipated services reported here or in the analysis that follows.

TABLE 16

Number and Percent of Services Anticipated to be Needed in 1985-86 by Students 16 Years of Age and Older Exiting the Educational System During School Year 1984-85[a]

Service Type	Number	Percent
Counseling/Guidance	66,059	14.3
Transportation	19,724	4.3
Technological Aids	10,175	2.2
Interpreter Services	2,356	0.5
Reader Services	3,110	0.7
Physical/Mental Restoration	13,349	2.9
Family Services	29,402	6.4
Independent Living	23,904	5.1
Maintenance	18,676	4.0
Residential Living	9,826	2.1
Vocational/Training	74,930	16.2
Postemployment Services	28,341	6.1
Transitional Employment Services	40,565	8.8
Vocational Placement	63,148	13.7
Evaluation of Vocational Rehabilitation Services	54,103	11.7
Other Services	3,790	0.8
Total[b]	461,458	100.0

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a/ Includes data reported by 50 States and Insular Areas.

b/ Since New York and Maine provided total counts of services only, some services for younger children may be included.

TABLE 17

Services Anticipated as Most Needed in 1985-86 by Students 16 Years of Age and Older Exiting the Educational System During School Year 1984-85

Handicapping Condition and Services	Percent of All Anticipated Services[a]
Mentally Retarded	
Vocational/Training Services	15
Vocational Placement	14
Evaluation of Vocational Rehabilitation Services	13
Counseling/Guidance	11
Speech or Language Impaired	
Vocational Placement	18
Counseling/Guidance	16
Vocational/Training Services	14
Evaluation of Vocational Rehabilitation Services	11
Visually Handicapped	
Vocational/Training Services	12
Technological Aids	10
Vocational Placement	10
Reader Services	10
Evaluation of Vocational Rehabilitation Services	10
Emotionally Disturbed	
Counseling/Guidance	17
Vocational/Training Services	14
Family Services	13
Vocational Placement	12
Evaluation of Vocational Rehabilitation Services	11

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a/ This proportion represents the number of services needed for those with the individual handicapping condition divided by the total number of services needed by those with the condition. For example, 15 percent of the services needed by the mentally retarded were vocational/training services.

Table 17 (continued)

Handicapping Condition	Percent of All Anticipated Services
Orthopedically Handicapped	
Vocational/Training Services	14
Transportation	11
Vocational Placement	11
Evaluation of Vocational Rehabilitation Services	11
Other Health Impaired	
Vocational/Training Services	13
Vocational Placement	12
Counseling/Guidance	10
Evaluation of Vocational Rehabilitation Services	10
Learning Disabled	
Vocational/Training Services	21
Counseling/Guidance	19
Vocational Placement	16
Evaluation of Vocational Rehabilitation Services	12
Transitional Employment Services	10
Deaf-Blind	
Vocational/Training Services	10
Multihandicapped	
Vocational/Training Services	10
Hard of Hearing and Deaf	
Vocational/Training Services	13
Vocational Placement	12
Technological Aids	11
Evaluation of Vocational Rehabilitation Services	11
Interpreter Services	11
Counseling/Guidance	11

handicapped and the hard of hearing and deaf, five and six services were prominent, respectively, among those anticipated. Deaf-blind and multihandicapped students needed very diverse services; only one service constituted at least 10 percent of the total number anticipated for each of these two conditions.

Table 18 presents the number and proportion of anticipated services needed by handicapping condition. Approximately 40 percent of the reported services were needed by mentally retarded students, 31 percent by learning disabled students, and 14 percent by emotionally disturbed students. Less than 5 percent of the services were needed by speech or language impaired, visually handicapped, orthopedically impaired, other health impaired, deaf-blind, multihandicapped, and hard of hearing and deaf students. These proportions are necessarily affected by the number of students with each handicapping condition exiting.

Table 19 presents the number of students exiting the system who needed no special services. Sixty-seven percent of these students were learning disabled while 15 percent were mentally retarded, and 10 percent were speech or language impaired. Given the relative proportion of these types of conditions among the handicapping population, these percentages are not surprising.

To assure comparable data, the number of students 16 years of age and older exiting the educational system in 1984-85 is compared with the number of services anticipated to be needed by students aged 17 to 22 in 1985-86, when the exiting students would be one year older. Table 20 shows the number of students exiting the system and the number of anticipated services needed for these students by handicapping condition. For all handicapping conditions, about two services were anticipated to be needed per pupil. Not unexpectedly, the learning disabled and speech impaired students needed the fewest services per pupil, about one per exiting student. These students also are receiving the fewest related services per pupil. The deaf-blind and multihandicapped students were believed to need the most services per pupil, seven and six, respectively; these students receive the greatest number of related services per pupil as well. The students with other conditions needing the most services per pupil were the visually handicapped, the hard of hearing and deaf, the other health impaired, and the orthopedically impaired; between three and four services were needed for the pupils in each of these handicapping conditions. Between two and three services were needed per pupil for mentally retarded and emotionally disturbed students.

For all the exiting students 16 years of age and older, approximately one-third were anticipated to need counseling and guidance (30.3 percent), vocational/training services (35.3 percent), and vocational placement (30.3 percent). About one-quarter of the exiting students were in need of evaluation for vocational rehabilitation services. (See Appendix Table EF2.) Five percent or less of the exiting students were expected to need interpreter services, reader services, residential services, technological aids, and other services.

As might be expected, the proportions of exiting students needing various services differed by handicapping condition. Of the 16 services listed (including other services), 12 were needed by more than one-third of the exiting deaf-blind

TABLE 18

Number and Percent of Anticipated Services for 1985-86 for Students 16 Years of Age and Older Exiting the Educational System by Handicapping Condition During School Year 1984-85

Handicapping Condition	Number	Percent
Mentally Retarded	183,507	39.8
Speech or Language Impaired	10,786	2.3
Visually Handicapped	5,697	1.2
Emotionally Disturbed	63,658	13.8
Orthopedically Impaired	10,056	2.2
Other Health Impaired	10,868	2.4
Learning Disabled	141,253	30.6
Deaf-Blind	1,280	0.3
Multihandicapped	18,968	4.1
Hard of Hearing and Deaf	15,385	3.3
Total	461,458	100.0

TABLE 19

Number and Percent of Students 16 Years of Age and Older Exiting the Educational System Needing No Special Services During School Year 1985-86

Handicapping Condition	Number	Percent
Mentally Retarded	5,083	14.6
Speech or Language Impaired	3,575	10.3
Visually Handicapped	174	0.5
Emotionally Disturbed	1,254	3.6
Orthopedically Impaired	419	1.2
Other Health Impaired	280	0.8
Learning Disabled	23,485	67.6
Deaf-Blind	20	0.1
Multihandicapped	149	0.4
Hard of Hearing and Deaf	318	0.9
Total	34,757	100.0

TABLE 20

Comparison of the Number of Students 16 to 21 Years Old Exiting the Educational System in 1984-85 and the Number of Anticipated Services Needed by 17- to 22-Year-Olds During School Year 1985-86[a]

	Number of Students Exiting[b]	Number of Services Anticipated	Number of Services per Pupil for All Exiting Students
Mentally Retarded	58,037	168,803	2.91
Speech or Language Impaired	8,205	9,680	1.18
Visually Handicapped	1,354	5,395	3.98
Emotionally Disturbed	22,144	54,735	2.47
Learning Disabled	90,515	127,282	1.41
Orthopedically Impaired	2,553	9,413	3.68
Deaf-Blind	172	1,155	6.72
Other Health Impaired	3,124	10,052	3.22
Hard of Hearing and Deaf	3,954	14,842	3.75
Multihandicapped	3,098	18,358	5.93
All Conditions	193,156	419,715	2.17

a/ This analysis does not include data for New Hampshire and Tennessee; these States reported 1,253 and 5,785 students exiting, respectively, but no data on anticipated services.

b/ This number includes those students not anticipated to need services.

students. For the multihandicapped, this was also true of 12 of the listed services. Exiting learning disabled and speech or language impaired students were anticipated to need a variety of services, but only counseling/guidance and vocational placement were needed by 20 percent or more of both these groups. More than 20 percent of the learning disabled also were likely to need vocational/training services. Vocational placement was anticipated to be needed by at least 20 percent of each of the individual handicapping groups. Vocational/training services were needed by approximately 30 percent or more of each handicapping group, except for the speech impaired. Evaluation of vocational rehabilitation services was needed by at least 25 percent of these in each handicapping category exiting except for the speech or language impaired and the learning disabled students.

In summary, across handicapping conditions, the States saw the major services being needed by exiting students as employment-related services and guidance/counseling; speech impaired and learning disabled students needed the fewest services per pupil. Learning disabled students were the largest group of exiting students who needed no services. Finally, deaf-blind and multihandicapped students needed the most services per pupil. While these data were largely estimated by the States, they provide the first nationwide information on what services adult agencies will need to provide to exiting handicapping students.

Special Education Programs and Related Services in Need of Improvement

States are required by the 1983 Amendments to the EHA to provide information on those special education programs and services in need of improvement. To meet this mandate, OSEP created a data form with two sections. The first section asked States to check a box indicating those programs and services in need of improvement and to provide a narrative description of the nature of the improvements needed. The instructions defined improved services as services

(a) not currently available for handicapped children and youth;
(b) in short supply for specific populations and/or ages; and
(c) in a stage where considerable development is necessary for the service to have maximum effectiveness or be delivered efficiently.

States were asked to assess whether six special education programs or processes and 13 related services needed improvement. The second section of the form required States to provide an unduplicated count of all handicapped children and youth needing improved services by handicapping condition and age group.

Number of Students in Need of Improved Services

Fifty-one States and Insular Areas providing data reported that 449,258 students were in need of improved services; about one-third (36 percent) of these students, or 161,388 students, were learning disabled. Table 21 presents the number of students in need of improved services by handicapping condition. Mentally retarded students comprised about 22 percent of these students (98,297), and speech or language impaired students made up 17 percent of the total (78,070). Emotionally disturbed students constituted 13 percent of the total (58,980). Orthopedically impaired, visually impaired, other health impaired, deaf-blind, multihandicapped, and hard of hearing and deaf students each made up less than 5 percent of the total number of students needing improved services. (See Appendix Table EG1 for these data by State.)

TABLE 21

Number and Percent of Students in Need of Improved Services by Handicapping Condition During School Year 1984-85

Handicapping Condition	Number	Percent
Learning Disabled	161,388	35.9
Speech or Language Impaired	78,070	17.4
Mentally Retarded	98,297	21.9
Emotionally Disturbed	58,980	13.1
Hard of Hearing and Deaf	9,933	2.2
Multihandicapped	15,468	3.4
Orthopedically Impaired	9,350	2.1
Other Health Impaired	11,851	2.6
Visually Handicapped	5,297	1.2
Deaf-Blind	424	0.1
All Conditions[a]	449,258	100.0

[a] American Samoa included 200 students with mild handicaps as needing improved services, but these students were not classified by handicapping condition; thus, the total for all conditions is not the sum of the individual number of students for each condition.

The States differed on which handicapping conditions were most and least in need of improved services. For example, mentally retarded students comprised from 0 to 47 percent of the students needing improved services across the States. (See Table 22.) For the learning disabled, the range was 0 to 74 percent; for the

TABLE 22

Range in Proportion[a] of Each Handicapping Condition in Need of Improved Services During School Year 1984-85

Handicapping Condition	Range
Learning Disabled	0 - 74
Speech or Language Impaired	0 - 88
Mentally Retarded	0 - 47
Emotionally Disturbed	0 - 87
Hard of Hearing and Deaf	0 - 52
Multihandicapped	0 - 30
Orthopedically Impaired	0 - 70
Other Health Impaired	0 - 12
Visually Handicapped	0 - 19
Deaf-Blind	0 - 1

a/ Proportion is the percent of total number of students reported as needing services.

speech or language impaired, 0 to 88 percent; for the emotionally disturbed, 0 to 87 percent. The range was smallest for the visually handicapped (0 to 19 percent), the other health impaired (0 to 12 percent), and the deaf-blind (0 to 1 percent).

The proportion of students needing improved services was calculated as a function of Chapter 1 of ECIA (SOP) and EHA-B combined child counts. (See Table 23.) Of all the handicapped students served, 12.3 percent were in need of improved services. Learning disabled and speech or language impaired students were the least likely to need improved services (10.8 percent and 8.2 percent, respectively), while the visually handicapped, other health impaired, deaf-blind, multihandicapped, emotionally disturbed, and orthopedically impaired students most needed improved services (approximately 20 percent each). When the proportions of students needing improved services are examined for individual States, a significant variation is seen across States. Some States reported that no children with a specific condition needed improved services, while other States reported that all handicapped children needed improved services. In a few cases, States reported that more than 100 percent of students needed improved services.

TABLE 23

Percent[a] of Children Served Under Chapter 1 of ECIA (SOP) and EHA-B Needing Improved Services by Handicapping Condition During School Year 1984-85

Handicapping Condition	Percent
Learning Disabled	10.8
Speech or Language Impaired	8.2
Mentally Retarded	15.2
Emotionally Disturbed	18.5
Hard of Hearing and Deaf	16.8
Multihandicapped	23.7
Orthopedically Impaired	19.8
Other Health Impaired	22.1
Visually Handicapped	20.5
Deaf-Blind	24.9
All Conditions	12.3

[a] Proportion based on the combined Chapter 1 of ECIA (SOP) and EHA-B child counts for the 1984-85 school year.

Age group data are not currently collected for the Chapter 1 of ECIA (SOP) program, as they are for the EHA-B program. While there is some evidence that the age distribution of children served under Chapter 1 of ECIA (SOP) may differ from that of children served under EHA-B, the proportion of students needing improved services has been calculated as a function of the EHA-B counts to provide some suggestive findings. Table 24 presents the proportion of students in each age group needing improved services. These figures indicate that the States view six- to 11-year-olds as best served, that is, needing fewest services relative to the number of children served. The group most in need of improved services was the 18- to 21-year-old group; approximately 25 percent of this group needed improved services. The preschool three- to five-year-olds were the next most in need of improved services (16.2 percent needed services) followed by the secondary school pupils (12- to 17-year-olds), 14.3 percent of whom needed improved services.

TABLE 24

Percent of Children Served Under EHA-B
Needing Improved Services by Age Group
During School Year 1984-85[a]

Age Group	Percent
3 - 5	16.2
6 - 11	10.3
12 - 17	14.3
18 - 21	24.7

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a/ Only EHA-B counts are available by age group; therefore, the results of this analysis should be viewed only as suggestive.

Programs and Services Needing Improvement

Fifteen States and Insular Areas indicated improved services were needed for all of the special education programs listed. Forty-three States and Insular Areas indicated that improvements were needed in instructional programs, and 42 States indicated improved services were needed in vocational education. Thirty-four States felt that they needed improvements in assessment; 32 States, that they needed improvement in instructional settings. Finally, 27 States indicated a need for improvement in evaluation, while 23 States needed improvement in their physical education programs.

Nine States felt that all the related services listed needed improvement. The category most often indicated as needing improvement was physical therapy; 39 States checked this category. Other categories checked most by States were occupational therapy (37 States), psychological services (33 States), and parent counseling/training (32 States). The related services needing improvement that were least often noted by States were medical services (16 States), diagnostic services (21 States), audiological services (21 States), recreation services (20 States), and school health services (21 States). Tables 25 and 26 itemize the specific needs of States for improved special education programs and related services.

TABLE 25

Number of States Indicating the Need for Specific Improvements in Special Education Programs During School Year 1984-85[a]

Program/Service	Type of Improvement	Number of States
Instructional Settings		32
	Additional Classrooms/Space	16
	Additional Equipment	4
	Additional Related Services/Space	6
Assessment		34
	Additional Staff	8
	Enhance Procedures/Instruments	12
	Inservice/Additional Training	5
Evaluation		27
	Additional Staff	4
	Enhance Program Evaluation Procedures/Instruments	9
	Enhance Student Evaluation Procedures/Instruments	11
	Inservice/Additional Training	2
Instructional Programs		43
	Additional Staff	14
	Enhanced/New Curriculum	11
	Expansion of Programs/Services	33
	Handicap Specific	31
	-Learning Disabled	12
	-Moderately Handicapped	6
	-Severely Handicapped	23
	School Level Specific	16
	-Preschool	6
	-Secondary	10
	Inservice/Additional Training	7
	LRE	7

Table 25 (Continued)

Program/Service	Type of Improvement	Number of States
Physical Education		23
	Additional Programs/Services	11
	Adaptive Physical Education	8
	Additional Staff	10
	Improved Staff Relations	2
	Inservice/Additional Training	6
Vocational Education		42
	Additional Staff	9
	Expansion of Programs/Services	36
	Add Vocational Programs to Regular and Special Education Curricula	11
	Prevocational Program	9
	Work-Study / Work Experience	6
	On-the-Job Training	5
	Transition	19
	Interagency Agreements	13
	Vocational Assessments	7

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a/ The number of States responding to each program/service represents the actual number of States that marked the corresponding box for needs improvement on the annual data forms (i.e., 31 States responded that they needed improvement with instructional settings). Within each topic, a State may be counted a varying number of times under the improvements listed (i.e., a State that responded that it needs additional classrooms and equipment under instructional settings would be counted once under each of these subtopics). A State whose answer is unique would be counted only under the broad topic headings (i.e., instructional settings).

TABLE 26

Number of States Indicating the Need for Specific Improvements in Related Services During School Year 1984-85[a]

Program/Service	Type of Improvement	Number of States
Psychological Services		33
	Additional Staff	23
	-Bilingual	2
	-For Rural Areas	3
	-For Severely Handicapped	3
	Expand/Enhance Services	12
	-Preschool Programs	2
	Improve Assessment	9
	-More Timely Evaluations	5
	Inservice/Additional Training	8
School Social Work		25
	Additional Staff	16
	Expand/Enhance Services	8
	-Liaison	4
	-Parent/Family Counseling	3
	Increase Funding	2
	Inservice/Additional Training	4
Occupational Therapy		37
	Additional Staff	28
	-Recruitment/Retention	11
	Definitional Clarification	5
	Expand/Enhance Services	18
	-For Rural Areas	6
	-For Severely Handicapped	2
	-Preschool Programs	3
	-Facilities	2

Table 26 (Continued)

Program/Service	Type of Improvement	Number of States
Speech/Language Therapy		29
	Additional Staff	18
	-Bilingual	3
	-For Preschool Population	4
	-For Rural Areas	2
	Expand/Enhance Services	8
	-Facilities	3
	-Equipment/Materials	2
	Inservice/Additional Training	2
	Policy Clarification	4
Audiological Services		21
	Additional Staff	12
	-For Rural Areas	3
	Expand/Enhance Services	11
	-Assessments	5
	Inservice/Additional Training	2
	Interagency Cooperation	2
Recreation Services		20
	Additional Staff	4
	Expand/Enhance Services	16
	-Facilities	2
	Interagency Cooperation	5
Diagnostic Services		21
	Additional Staff	10
	-Bilingual	2
	-For Rural Areas	3
	-For Severely Handicapped	2
	Expand/Enhance Services	13
	-Assessment	5
	-For Rural Areas	3
	-Preschool Programs	4
	Improved Diagnostic Instruments	3
	Inservice/Additional Training	5

Table 26 (Continued)

Program/Service	Type of Improvement	Number of States
Physical Therapy		39
	Additional Staff	32
	Expand/Enhance Services	14
	-For Rural Areas	8
	-Hours Available	3
	-Preschool Programs	2
	Increase Funding	3
	Definitional/Policy Clarification	4
Transportation Services		23
	Additional Staff	6
	-Aides	5
	-Drivers	2
	Expand/Enhance Services	16
	-Increase Available Vehicles	9
	-Reduce Transit Time	7
	Increase Funding	5
	-For Rural Areas	2
	Inservice/Additional Training	4
	Policy Clarification	6
School Health Services		21
	Additional Staff	12
	-Registered Nurses	8
	Expand/Enhance Services	11
	-Facilities	3
	-For Severely Handicapped	3
	Assessments	2
	Interagency Cooperation	4
Counseling Services		29
	Additional Staff	16
	-Elementary	4
	Expand/Enhance Services	17
	-For Emotionally Disturbed	4
	-For Transitional Students	5
	-For Vocational Students	3
	Inservice/Additional Training	8
	Interagency Cooperation	3

Table 26 (Continued)

Program/Service	Type of Improvement	Number of States
Medical Services		16
	Additional Staff	7
	-For Rural Areas	2
	Expand/Enhance Services	8
	-For Rural Areas	2
	Increase Funding	2
	Inservice/Additional Training	2
	Interagency Cooperation	3
Parent Counseling/Training		32
	Additional Staff	5
	Expand/Enhance Services	23
	Inservice/Additional Training	2
	Increase Funding	3
	Inservice/Additional Training	2
	Parental Involvement	10
	Interagency Cooperation	2

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a/ The number of States responding to each program/service represents the actual number of States that marked the corresponding box for needs improvement on the annual data forms (i.e., 33 States responded that they needed improvement in their psychological services). Within each topic, a State may be counted a varying number of times under the improvements listed (i.e., a State that responded that it needed additional bilingual staff and staff for rural areas under psychological services would be counted once under each of these subtopics). A State whose answer is unique would be counted only under the broad topic headings (i.e., psychological services).

Summary

Several themes or overarching areas of concern were evident in the improvements the States viewed as necessary in special education programs and services. These themes were prominent in the counts of students needing improved services, as well as in instructional programs and related services needing improvement. Repeatedly noted as areas of concern were personnel, preschool programs, transitional programs, programs for those with specific handicapping conditions, evaluation and assessment, rural special education, and interagency cooperation. Each of these themes is described briefly below.

The States, almost uniformly, were in need of trained personnel. This personnel need ranged from specialized related services personnel, such as occupational therapists and physical therapists, to less specialized personnel, such as transportation aides trained to work with handicapped students. Personnel trained to work with severely handicapped students were among those most needed. Confirmation of this is evident from the analysis of students most in need of improved services; the severely handicapped were among those most in need of improved services. Competition with the private sector for trained personnel was a problem, particularly with personnel such as occupational therapists, physical therapists, nurses, and other trained medical personnel. Rural States or States with remote populations found it very difficult to hire and keep trained personnel. There also appears to be a growing need for specialized personnel who are bilingual. Finally, inservice training and staff development are areas where States feel the need to improve services. This includes inservice training for special education personnel, as well as related services personnel. Regular education personnel, the States emphasized, need to be more aware of how to deal with handicapped children and youth.

Students in two age groups were highlighted across the improvements needed for special education programs and related services. The first group that was prominent among those needing improved services was preschool children. States noted that more programs were needed for the preschool handicapped, that trained personnel were particularly needed at this level, and that unique assessment tools were needed for these children.

The second group of the States noted as most in need of improved services was older students, especially those between 18 and 21 years of age. The 18- to 21-year-old group became a larger proportion of the total population of handicapped students served under EHA-B from 1978-79 to 1985-86: the number of students served in this age group increased 93 percent during this time. According to States, transitional programs for handicapped students need to be created and improved. These transitional programs need to focus on handicapped students as they move from school to work, and from a sheltered lifestyle to a more independent one. Particularly noted by States was the need for vocational assessments, for prevocational courses, and for staff trained to deal with transitional students. The emphasis States placed on improved services for these two age groups is reflected in Federal, State, and local policy priorities for these traditionally under-served groups.

Programs and services were also needed for specific handicapped groups across the States. In particular, States saw the need to improve services and programs for the severely and profoundly handicapped. Programs for the emotionally disturbed were frequently in need of improvement. For students with learning disabilities, the States' principal concerns centered on a better definition of the condition, better testing procedures, and alternative programs for students who are currently classified as learning disabled.

Clearly the States were preoccupied with needs related to assessment and evaluation. Not only did States indicate needs associated with these processes directly, that is, on the instructional programs and setting table; but States frequently noted assessment and evaluation needs on the related services table. For example, States reported that psychologists spend little time counseling due to the amount of time spent on assessment and evaluation. Enhancement of health assessments was frequently noted as an area needing of improvement. Better testing procedures for particular handicapping conditions and age groups were also an area of concern.

Rural needs were highlighted in the areas of transportation, personnel, facilities, and equipment. The great amount of time some rural special education students spend in transit each day was noted as a problem, as was a need for more specialized buses and vans. The lack of some facilities in rural areas was noted, as was a dearth of specialized personnel, as noted earlier.

Finally, the need for and improvement of interagency cooperation was noted by States in four different areas. Interagency cooperation was most often noted in relation to medical services, vocational programs, transition services, and recreation services. The lack of functional agreement was noted more often than the lack of any agreement. The funding of particular needs was also in question as States sought answers about which agencies were responsible for providing particular programs and services, especially medical and transition services.

Summary and Conclusions

The number of handicapped children counted as receiving special education and related services continued to increase during 1984-85; however, the increase from 1983-84 was just 8,044 children. Growth in the number of learning disabled children has stabilized significantly but does still increase. The 18- through 21-year-old handicapped population grew at a rate of 2.2 percent, while the groups aged three through five and six through 11 grew at a 0.6 percent rate and the 12- through 17-year-old group decreased by 0.5 percent.

Nearly 5.8 million related services were provided to the approximately 4.4 million handicapped children and youth counted according to data collected for the first time for 1984-85. Transportation was the related service most frequently provided, with over one million services supplied. Diagnostic and psychological services were next most frequent, with nearly three-quarters of a million services provided of each.

Nearly 92 percent of handicapped students were educated in regular school buildings that provide them with contact with their nonhandicapped peers. Approximately 6 percent of students were placed in separate schools, over 1 percent in residential facilities, and about 1 percent were served in home/hospital placements. Data indicate significant variation in placement patterns based on a student's handicapping condition.

States reported that over 274,000 special education teachers were employed in the education of handicapped children and youth during the 1984-85 school year, this represents an increase of 2 percent from 1983-84. States indicated that nearly 23,000 additional teachers were needed. Over 226,000 related service and other personnel were reported as employed, with over 8,000 of these personnel needed.

Nearly 212,000 handicapped students were reported as exiting from school during the 1984-85 school year. About 54 percent graduated, with 21 percent dropping out, 4 percent reaching the maximum age, and 18 percent "other" (status unknown, lost due to tracking, died, or otherwise not categorized). For these exiting students, States reported over 461,000 services were anticipated to be needed in the years following exit. Of these services, the most prevalent were vocational training, counseling/guidance, vocational placement, and evaluation of vocational rehabilitation services.

States reported that nearly 450,000 students needed improved programs or services. The following programs or services were frequently listed as needing improvement: preschool programs, transition programs, evaluation and assessment, rural special education, interagency cooperation, personnel, and programs for specific handicapping conditions.

In conclusion, this chapter has summarized State-reported data mandated by Section 618 of EHA. In many cases, these data are being reported for the first time since the enactment of the 1983 amendments to EHA-B. These data provide a basis for enhancing the understanding of the extent of implementation of EHA-B and for identifying continuing challenges. In the coming year, OSEP--working with other agencies, organizations, and individuals--will be attempting to explore fully these data and their implications for specific actions to improve programs and services for handicapped children and youth.

The Implementation of Key Provisions of the Act Assuring the Rights of Handicapped Children

Part B of the Education of the Handicapped Act (EHA-B) requires that each handicapped student receiving special education and related services have an individualized education program (Sections 602(19) and 612(4)). The individualized education program (IEP) is to be developed (and reviewed at least annually) by the child's parents, the child's teacher, an LEA representative, and where appropriate, the child. The IEP document is to include statements of the child's present level of educational performance, annual goals and short-term objectives, specific educational services to be provided, the extent to which the child will participate in the regular education program, dates for initiation and anticipated termination of services, and appropriate objective criteria for determining whether objectives are being achieved.

EHA-B contains other provisions that assure that the rights of handicapped children will be protected. Section 615, the procedural safeguards provision of the Act, provides parents the right to review their child's educational records and to obtain an independent evaluation; requires that a surrogate parent be assigned and other procedures established to protect the rights of the child whenever the parents or guardian are unknown or unavailable; requires that parents be provided written prior notice whenever the educational agency proposes or refuses to initiate or change the identification, evaluation, or educational placement of the child or the provision of a free appropriate public education to the child; and requires that parents be provided an opportunity for an impartial due process hearing if they have complaints in any matter relating to the identification, evaluation or educational placement of the child, or the provision of a free appropriate public education.

The IEP and procedural safeguards provisions of EHA-B provide for significant opportunities and stipulate certain rights to parents for involvement in the education of their handicapped children. Under the IEP provisions, for example, parents can play a key role, along with school personnel, in determining the nature and extent of their child's special education and related services needs, the services to be provided to meet those needs, and the setting in which the child will receive those services. The right to be informed by the school of certain actions it proposes to take, to review educational records maintained by the school on their child, and to challenge or disagree with the school in a due process hearing enables parents, to assure that their child's rights under the law are protected. The effect of these provisions was to empower and entitle parents to play a major role in the education of their handicapped children.

Previous Reports to Congress have documented the dramatic impact EHA-B has had on the educational opportunities being provided to handicapped children and youth, and the role Federal, State and local educational agencies have played in achieving this success. A decade after the law's passage, we will examine the implementation of the opportunities and rights provided parents to participate in the education of their handicapped children. This chapter will focus on two of the aspects of parent involvement described above: parent participation in the development and implementation of the individualized education program, and the procedures employed by educational agencies for the resolution of disputes between parents and schools.

This chapter presents information on the implementation, impact, and effect of EHA-B procedures and rights empowering parents to share with schools the responsibility for their child's educational program. The chapter first briefly describes events and forces which led to the establishment in EHA of a partnership between parents and the schools, and the opportunities and demands resulting from this partnership for parents of handicapped children. Next, this chapter presents OSEP initiatives to assist parents in obtaining the knowledge and skills necessary for participating with the schools in the educational process, and to support the establishment of an effective parent-school partnership. In the subsequent section, this chapter summarizes the experience of parents in the development and implementation of their child's individualized education program. Finally, the impact and effect of procedures implemented by educational agencies to resolve differences between parents and schools are discussed.

Background

The entitlement of parents to certain rights and opportunities in the education of handicapped children, as well as the entitlement of these children to a free appropriate public education, represented a major change in educational policy. This change in policy has been characterized as the legalization of special education (Neal and Kirp, 1985). As an approach to effecting change in public policy, legalization has been used extensively in this century to establish the rights of certain individuals to services or benefits under the Constitution and, then, to provide such individuals with the mechanisms necessary to protect those rights. When proponents of change in public policy identify that established institutional values, goals and priorities are inconsistent with the interests of some segment of society, and when other approaches have proven ineffective in achieving the desired policy objectives, an approach based on legal concepts and premises has been employed. The most notable use of this approach in this century was in the civil rights movement, which attained for racial and other minorities equal rights and opportunities under the Constitution and secured the protection of law to assure that these rights are upheld. This reliance on a legal remedy has been one of last resort, employed when other efforts have failed to produce the desired result.

The enactment of the Education for All Handicapped Children Act (P.L. 94-142), which amended and became Part B of the Education of the Handicapped Act (EHA), represented the culmination of such an evolutionary approach to changing educational policy, undertaken by special educators and parents to improve the educational status of handicapped children and youth.

Many of the reasons underlying professional and advocate initiatives to improve services for the handicapped are documented in the introduction to the Act. Included among them were that the educational needs of millions of handicapped children were not being fully met; that some handicapped children were entirely excluded from the public school system; and that for many handicapped children in the schools, appropriate services were not being provided because their handicapping conditions had not been identified.

In the decades preceding the enactment of EHA-B, efforts had been undertaken by disability advocacy organizations and their State-level networks to educate the public and schools as to the educability of retarded children, and to the racially discriminatory testing procedures sometimes used to assign children to classes for the retarded. When these efforts resulted in what advocates perceived as limited impact on the willingness of the public and the educational system to improve services for handicapped children, they turned to the media and political arena to increase awareness and stimulate action to remedy the lack of appropriate services. While the momentum for change increased and the need for improved services was more widely recognized as a result of these efforts, significant progress towards the reordering of educational priorities and goals necessary to provide all handicapped children a free appropriate public education was not achieved.

Having failed to attain their goals, advocates turned to the courts where, in 1972, litigative success was achieved in two landmark cases. First, the right to education for mentally retarded children (PARC v. Pennsylvania) was established. That same year the right to education was extended to all handicapped children in a second court action, Mills v. Board of Education. The PARC and Mills decisions decreed that handicapped children were to be afforded the right to education in the least restrictive environment, and further established for their parents or surrogates the right to due process. Litigation in other States followed rapidly, establishing across the nation case law on the educational rights of handicapped children.

While the right to education for handicapped children was being established in the States, special educators and advocates turned their attention to Congress to secure Federal legislation which would establish and protect the right of all handicapped children to a free appropriate public education to meet their unique needs, and provide the resources necessary to assist States and localities in serving handicapped children. Although the courts had asserted that handicapped children had a right to a free education delivered in the least restrictive environment, the substance of that right remained undefined. In order to provide that substance, and to do so within the context of local governance over education, the IEP was chosen in Congressional debate and advocated by many professionals as the mechanism for operationally defining childrens' right to education. The IEP and the process specified for its development empowered parents, acting on behalf of their handicapped child, to participate with school officials in defining the nature and extent of the educational services required on the basis of the individual child's educational needs.

To assure accountability for the development and delivery of the individualized educational program, a means of enforcing its provisions and of assuring compliance with the intent of the law was needed. A method to assure the accountability of the educational system based solely on agency or procedural review was rejected in favor of a dual mechanism. First, State and local school systems would be held accountable for compliance with procedural requirements of the law through the means of agency review. And second, the right to due process was incorporated as a way for parents and schools to assure accountability with respect to the individual child in such matters as identification, evaluation, provision of services, and placement. Establishment of the right to due process was consistent with the concept of individual entitlement as a means of ensuring compliance and, as such, provided a forum for settling differences between parents and the schools over the education of the individual child. Thus, passage of EHA-B with its procedural safeguards and guarantees represented the entitlement of handicapped children and their parents to the rights and opportunities necessary to assure the provision of a free appropriate public education.

Defining education as an individual right, and assigning to parents a role in defining and enforcing that right was in marked contrast to the way special education had historically operated. EHA-B shifted the orientation of educational planning and the delivery of services from one managed primarily by educators to one in which school personnel and parents would share responsibility for making decisions about the program and services the school would deliver. In so doing, the law changed not only the relationship between parents and the schools, but also placed on parents new demands for skills and knowledge to enable them to be effective in carrying out their roles and responsibilities in the educational planning and programming process.

Literature and practice associated with parent involvement have addressed in various ways the nature of the knowledge and skills parents require to participate effectively in a partnership with school personnel, and to safeguard the rights of their handicapped children. There are common categories of information or knowledge (e.g., evaluation, IEP development, placement), that parents must be familiar with and understand in order to represent their child's interests and exercise their rights. While the specific information the parent requires within a given category is, in part, dependent on the nature of the decision or action being taken and the parent's previous experience with special education, it is generally agreed that the following broad types of information, at a minimum, are essential:

- the nature of the child's educational problems and needs;
- the nature of the educational action, program or service, being proposed or provided;
- the nature of services and programs appropriate to meet the child's needs;

- the steps in and procedures associated with the special education planning process;
- parent and child rights and procedural safeguards; and
- resources available to parents outside the school.

In addition to their need for information, varied and often unfamiliar skills are needed by parents to participate effectively in the educational planning process. These skills can be grouped into three broad categories corresponding to the major functions parents perform in the educational decision making process: providing input to school personnel; obtaining and incorporating information from school staff and other sources; and making a judgment or decision on the basis of available information. Critical to providing input in the planning process and to having their perspectives clearly understood by school personnel are parents' skills in selecting, organizing, and presenting relevant information about their child in areas such as behavior and performance in the home. For example, in order to assist school personnel in determining the need for an individual evaluation, parents are often asked to describe the nature and extent of difficulties the child experiences in daily living activities in the home and in social interactions with family and friends. Later in the planning process, when parents and school personnel establish educational goals for the child's IEP, parents again have the opportunity to contribute their own ideas on what they want the school to address through the educational program. The likelihood that the decisions eventually reached in the planning process will address parental concerns and reflect their desires can be enhanced if parents are skilled in selecting, organizing and presenting to school personnel information and perspectives which represent their view of the handicapped child.

In order to understand the perspectives of school personnel and the actions they propose taking with respect to the handicapped child, parents must obtain and incorporate information provided by school staff and others into their own information and understanding about their child. Doing this effectively requires skills of listening to information provided by others, asking questions to obtain satisfactory explanations, and assessing this new information in light of their own knowledge so that alternative points of view or options are clear. For example, in order to understand the nature of their handicapped child's strengths and weaknesses and their implications for required special education and related services, parents need to understand the results of the various evaluation procedures conducted with their child. To do so requires listening carefully to the results presented by school staff and other professionals, seeking explanations about how these results relate to the difficulties the child is experiencing, and assessing this information in light of their own perceptions of their child's needs.

Finally, in order to join with school personnel in making a decision, parents must make a judgment about the information available to them. Skills required by parents to make such a judgment include evaluating the significance and implications of what they know and have heard and reaching conclusions about what services their child may require and in what setting. For example, in order to reach a decision about the placement of a handicapped child, a parent must be able to evaluate alternative placements in light of their curricular, instructional, and social implications for their child's education. These judgments provide a basis for deciding whether to concur with the school's placement recommendation, to negotiate for a different placement option, or to reject what the school has suggested and, if necessary, to pursue the matter through due process procedures.

While some parents may require little or no assistance to acquire the knowledge and skills associated with effective participation in educational planning and programming, others require extensive support and training. Since the enactment of EHA-B, Federal, State and local educational agencies, frequently in a partnership with parent and advocacy organizations, have engaged in a wide range of initiatives to assist parents of handicapped children to take advantage of the opportunities and rights available to them in designing and evaluating their child's educational program. In the next section of this' chapter, Federal initiatives that have been undertaken to provide such assistance are discussed.

OSEP Initiatives to Support Parent Participation

Federal efforts to implement Part B of the Education of the Handicapped Act requirements represent a comprehensive array of strategies designed to effect change. Previous Reports to Congress have detailed Federal initiatives to improve the availability of, access to, and quality of programs and services provided handicapped children. The national progress being made to provide all handicapped children a free appropriate public education has significantly been enhanced by the expanding effectiveness of parents to participate and exercise their rights in educational planning and programming for handicapped children. Recognition of the critical role of parents in the education of handicapped children preceded enactment of EHA-B and has been an integral component of Federal efforts to implement the Act.

Federal initiatives focusing on parents of handicapped children have been designed to achieve three primary goals. These are:

- To promote awarenesss among parents, educators and the general public about the educational rights of handicapped children, the potential capabilities of children with handicapping conditions, and the educational and related service opportunities available for handicapped children.

- To assist parents in acquiring the skills and knowledge necessary to effectively work with school personnel in the planning, programming, and delivery of special education and related services needed by their children.

- To assist parents in their efforts to access educational, related, employment, health, and social services required by their handicapped children and youth.

The Office of Special Education Programs (OSEP) through its discretionary programs has provided information, training, and systems capacity building support to address these goals. This section provides an overview of the four major complementary and coordinated activities OSEP has supported to provide assistance to parents consistent with achieving the above stated goals.

National Information Centers

For over a decade, OSEP has supported activities designed to promote, on a national basis, awareness about the educational rights of handicapped children and youth, their needs, and services available to meet their needs, and to serve as an information resource for parents and others to assist them in providing appropriate educational services to children with handicaps.

Closer Look and the National Information Center for Handicapped Children and Youth

Since 1969, OSEP has supported the operation of a national information center on the education of handicapped children and youth up to the age of 21. The goals of this center have been to increase awareness among parents, educators, and opportunities for handicapped children; to stimulate inquiries to the center regarding the education of handicapped children; and, by serving as a clearinghouse, to provide information to persons concerned with the education of handicapped children.

Over the years, there have been two major components to the center's activity. First is a media outreach campaign which has developed and distributed public service announcements to commercial and public television and radio stations at the local and national levels. The goals of the media outreach activities have been to attract the attention of parents and others, and to stimulate inquiries to the center for information regarding the education of the handicapped. The second component is a program which has developed, synthesized, and disseminated information to assist in meeting the needs of handicapped children. This program has developed the capacity to respond to individual inquiries and questions as well as to distribute information which addresses topics of widespread interest.

While the goals of the center have been consistent since it was first funded under the name Closer Look over a decade ago, its emphasis has changed over the years as educational rights, service delivery, and public attitudes have evolved. Prior to the enactment of EHA-B, the center focused its media and information programs on increasing the awareness of parents and the public in general about the need to identify children with special needs who might have a handicapping condition, the availability of services to meet these special needs, and how to seek assistance in obtaining appropriate educational services. During this period, the center received thousands of inquiries each year and responded with a combination of materials published by disability organizations and by the center itself, answering questions, giving advice, and sharing experiences among persons concerned with the education of handicapped youngsters. Although providing service to parents of handicapped children was a major focus of its activity, the center served also as a resource for educators and other professionals in their attempts to understand the educational problems and needs of handicapped children and to provide appropriate services.

With the enactment of EHA-B, the center expanded its media and information programs to describe for parents and others the newly acquired educational rights of handicapped children; to publicize issues and problems facing handicapped children and the significance of receiving an appropriate education; to improve the general public attitude toward, and understanding of, children with handicapping conditions; and to advocate the integration of people with disabilities into the community. In FY 82, the National Information Center for Handicapped Children and Youth (NICHCY) succeeded the original parent information center, with expanded responsibilities for providing information to meet the transition needs of handicapped youth and to attract persons to a career in the special education-related services field.

NICHCY, currently operated by Interstate Research Associates of Rosslyn, Virginia, provides a variety of information and other services to parents and educators:

- Response to specific questions from parents, professionals and other interested parties;
- Publications which address commonly asked questions about the availability of services and resources;
- State-of-the-art publications which review current research, program information, and effective practices;
- Technical assistance to parent and professional groups provided through workshops, presentations, and consultation to increase communication, coordination, and resource sharing; and
- Aid in encouraging persons to prepare for careers in the special education and related services field.

Of the over 18,000 individual requests for information received by NICHCY during FY 85 and FY 86, 55 percent were from parents of disabled children. During this same period, over 60,000 parents, educators and others were reached directly by information disseminated by the center. Through its inquiry/response and publication programs, NICHCY is able to address a variety of topics of current and emerging interest to parents and others. These topics include

- facts about different disabilities, including rare syndromes;
- educational and civil rights, under Federal law, of persons with handicaps;
- community, State, and local resources for parents and educators to access;
- vocational and transition needs and resources;
- least restrictive environment;
- parents' guides to early intervention, vocational, and career planning; and
- alternatives for community living.

In addition to answering individual requests for information from parents and others, NICHCY conducts outreach activities designed to publicize its information resources and to improve awareness about the needs of and services for handicapped children and youth. In FY 85 and FY 86, NICHCY participated in over 45 conferences of parent and educator groups and distributed public service announcements to approximately 700 television and 2,500 radio stations on the abilities of persons with handicaps and on careers in special education.

HEATH Resource Center

The demand for and increase in educational services for handicapped students during the last decade has not been limited to students of school age. Many institutions of higher education and other educational and training facilities nationwide have been developing specialized programs and services which enable students with disabilities to participate in postsecondary education opportunities. As students leaving the public school system and their families explored postschool options, many found it difficult to locate information about the postsecondary education options available that would provide the support and other services they might need in order to attend educational and training programs. To improve the ability of institutions of higher education and other postsecondary programs to serve students with disabilities and to help those students and their parents locate appropriate places to study, OSEP joined with agencies in the private sector in 1977 in awarding funds to the American Council on Education for the creation of Project HEATH, an information resource on postsecondary educational opportunities.

During its initial years of operation, Project HEATH provided technical assistance primarily to institutions of higher education designed to improve service delivery to disabled students. Since 1980, the HEATH Resource Center has been supported entirely with Federal funds and since 1984 has operated the National Clearinghouse on Postsecondary Education for Handicapped Individuals under the authority of Section 633 of Part D of the Education of the Handicapped Act as amended by P.L. 98-199.

The HEATH Resource Center serves as an information exchange for disabled students, their parents and advocates, and educators about educational support services, policies, procedures, adaptations, and opportunities for postsecondary education. The center maintains and disseminates information about college and university programs, as well as on programs administered by vocational-technical schools, adult education programs, independent living centers, and other training entities after high school. In order to reach as many interested persons as possible with its information resources, the center employs a variety of strategies. Outreach activities to publicize the availability of its information resources and services for disabled individuals are conducted through the use of print and electronic media, and through direct contacts with organizations and associations serving disabled individuals and their families. In addition, the center develops and disseminates fact sheets, monographs, newsletters, and resource directories on request. Finally, the center responds to consumer inquiries to its toll-free telephone number with counseling and information. In FY 85, the center received over 15,000 telephone and written inquiries for information related to postsecondary education issues and the disabled. Among the center's recent initiatives have been its focus on developing and disseminating information about postsecondary education options for persons who are severely handicapped, traumatically head injured, severely learning disabled, and those in transition from school to working life.

Parent Training Projects

The opportunities for parent involvement in the educational process and the critical role of parents as advocates, teachers, and decision makers that emerged with the enactment of State and Federal laws focused the attention of policy makers and administrators at all levels on the need to directly assist parents in acquiring the skills and knowledge which would enable them to effectively participate with the schools in the education of their children. Since 1975, the Federal government has funded parent organizations and coalitions of parent organizations to strengthen their capacity to provide training to parents of handicapped children for acquiring the knowledge and skills necessary to participate in their children's educational program.

In 1975, OSEP awarded its first grant for parent training in the State of Massachusetts where the educational rights of handicapped children had been established in the previous year with the enactment of Chapter 766. Located at the Federation for Children with Special Needs, a coalition of parent organizations, this project provided information and assistance to parents regarding their children's rights under the new State law, how to access educational opportunities for their children, and how to serve as their child's representative in the educational planning and programming process. Through its training activities and individualized response to parents, the Federation's project demonstrated the effectiveness of parents assisting other parents to acquire the knowledge, skills, and confidence to work effectively with the educational system to meet the needs of their children.

The success of this pilot project led OSEP to expand its support to parent coalitions for training and information activities. In 1976, through its recruitment and information program, OSEP awarded contracts to parent coalitions located in five States: Indiana, Illinois, New Hampshire, Massachusetts, and Ohio. These projects, designed to strengthen the ability of established organizations to meet the emerging needs of parents of handicapped children, developed parent training programs and information services to assist parents to become active and effective partners in the educational process. In addition to serving parents within their own States, these projects served as models for the formation of parent coalition projects in other States with whom they shared their experiences and knowledge.

In 1977, OSEP established parent training as a priority within its personnel preparation program and set-aside funds to support new projects designed to further expand parent training opportunities. Competitive grants were awarded to both coalitions of parent organizations and universities to develop approaches to meeting general and specialized training needs of parents of handicapped children. Support for parent training continued as an administrative priority within the personnel preparation program until the enactment of P.L. 98-199 which in 1983 authorized a program of grants, to be administered under Part D of EHA, for parent organization projects and established a set-aside of 10 percent of funds appropriated for Part D for such projects. The purpose of these projects is to provide training and information to parents of handicapped children and youth, and to volunteers who work with parents to enable them to participate more effectively with professionals in meeting the educational needs of handicapped children and youth. To improve access to parent training and information services, grants under this program were to be distributed geographically, to the greatest extent possible throughout all the States, and were to serve parents on a Statewide or regional basis. Projects funded under this program assist parents to

- Better understand the nature and needs of the handicapping conditions of their children;

- Provide follow-up support for their handicapped child's educational programs;

- Communicate more effectively with special and regular educators, administrators, related services personnel, and other professionals;

- Participate in educational decision making processes including the development of the child's IEP;

- Obtain information about the programs, services, and resources available to their handicapped child and the degree to which they are appropriate; and

- Understand the provisions for the education of handicapped children under the Education of the Handicapped Act.

In FY 86, 49 grants to parent organizations in 40 States were being funded under this program. These projects are supported in their efforts through an OSEP contract with the National Technical Assistance to Parents Program (TAPP), which is administered by the Federation for Children with Special Needs in Boston, Massachusetts. The TAPP project provides technical assistance to the Federally funded parent projects as well as to other parent projects through its national office and four regional centers located in Georgia, Minnesota, New Hampshire, and the State of Washington. Since its funding in FY 84, the TAPP project has conducted two national meetings annually on such topics as least restrictive environment, transition, and child abuse and neglect; has conducted regional workshops attended by representatives of parent organizations in 13 States; and has collaborated with other national organizations and projects in sponsoring special purpose meetings on issues in service delivery to handicapped children and youth. In addition to its conference activities, the TAPP project assists parent organizations to improve their management and training capabilities, and develops and disseminates methods and materials to meet the special needs of parents, such as military personnel, who traditionally have been underrepresented in parent training activities.

Direction Service

Despite the availability in many communities of a broad range of educational and other service options to assist families in meeting the diverse needs of their handicapped child, there is no single source of information to which families can go to find out what these services are, where they are located, and how and when they should be accessed.

To assist parents to identify, locate, and access services to meet the needs of their handicapped child, a Federal initiative was undertaken in 1978 to support the development of local models that would facilitate the match between individual needs and services. Known as Direction Service, projects were funded in over 20 communities with the goal of developing locally appropriate procedures and approaches for aiding parents to obtain and coordinate services for their children. These projects were intended to develop and demonstrate the effectiveness of the direction concept and, when Federal support ended, to develop local sources of funding to continue their operation. Although these projects were unique in that they served different communities with diverse populations and service structures, they shared four service components:

- Resource Information System, a comprehensive, up-to-date system of information about services, programs, and other resources available in the community to meet the needs of client families.

- Intake and Assessment, a coordinated mechanism for parents to discover, interpret, or re-examine their child's needs. The procedures utilized address the broad spectrum of educational, health, social, and recreational needs that are short- or long-term in nature, anticipated as well as unexpected.

- Search and Match, direct assistance to parents that helps them identify their options, choose the ones that are right for them and their child, and then take the necessary steps to get the proper mix of services.

- Follow-Up, the process of monitoring the family's changing circumstances, and ensuring that there exists a set of consistent family and child oriented check-points to assure that the child is getting the necessary services. Follow-up also involves checking to see that, over time, services are appropriately addressing the child's needs.

In 1981, when the model development and demonstration projects were completed, the focus of Federal support for direction service shifted from development to technical assistance. That year, a contract was awarded to Morgan Blashfield, Inc. of North Andover, Massachusetts to analyze the experience of the model projects, describe procedures and practices found to be successful, promote awareness about direction service nationally, and provide technical assistance to community agencies and organizations interested in implementing and adapting the direction service concept.

In FY 85, OSEP awarded a Cooperative Agreement to the National Parent CHAIN to establish a National Direction Service Assistance Project (NaDSAP) which would continue to provide technical assistance for the implementation of direction service activities in new States and communities. The NaDSAP project provides assistance to State and local parent and professional service organizations which want to integrate direction service activities in their operations. During the first two years of project operations, NaDSAP has worked with organizations in eight States: Arkansas, Colorado, Florida, Illinois, Ohio, Oregon, Virginia, and West Virginia.

The NaDSAP project has assisted States and local communities to develop direction service sites and to increase their capacity to meet the service needs of handicapped children and their families. With assistance provided by the project, legislation was implemented in Illinois to provide direction service through the State library network, enabling parents and professionals local access to information on service availability. In Colorado, NaDSAP participated in the establishment of the Colorado Disabilities Resource Center which plans to develop a Statewide data base on local services. In three other States participating in the project, NaDSAP technical assistance has contributed to the development of direction service operations in nearly 20 communities. In other States which have more recently joined the project, NaDSAP assistance is focusing on increasing awareness and organizational capacity for implementation of direction service.

Regional Resource Centers

OSEP supports six Regional Resource Centers that assist State and local educational agencies in developing quality programs and services for all handicapped children by providing consultation, technical assistance, and training. A major goal of Regional Resource Center (RRC) activity is to provide assistance to the States to improve information dissemination to and training for professionals and parents of handicapped children (EHA Section 621(a)(4)). Parents from each State participate as members of the advisory group of each RRC, providing consultation, recommendations, and leadership along with State Directors of Special Education in determining needs and priorities for RRC activities. The RRCs have contributed to enhancing the service capacity of State and local educational agencies and parent organizations. Further, they have provided training designed to improve the effectiveness of the school/parent partnership in educational planning and programming. These efforts are illustrated by the following FY 1986 RRC activities.

- Through broad-based participation and collaboration of all Northeast State educational agencies, Federally funded parent assistance projects and special education professionals, the Northeast Regional Resource Center convened multiple regional and State conferences and disseminated State-of-the-art information to approximately 1,500 parents and professionals to improve the quality of family and school relationships and individualized programs for handicapped students. For example, approximately 150 family members and school personnel from the region attended a conference entitled "Special Education Rights and Responsibilities: Families and Schools Making It Work." The conference focused on strategies to improve the quality of relationships between families and schools in order to meet the special education needs of students and avoid negative effects of adversarial relationships and proceedings. Parents and educators who attended this conference from New Hampshire returned home and formed the State's Parent/Professional Partnership Steering Committee. The objectives of this committee include the development of a State Parent Advisory Group, response to parent/professional partnership needs as they arise, and the development of a handbook for parents and professionals.

- The Great Lake Area RRC assisted parent organizations in five of the seven States in the region by developing computerized service provider data bases. These data bases provide parents as well as teachers, related service personnel, administrators, and other agencies access to information on the availability of specialized services available in the region for children with disabilities.

- The Western RRC each year sponsors a conference for parents representing State level coalitions of parent organizations within the region. The FY 86 conference, attended by State Directors of Special Education and parent coalition representatives, addressed the implications of cultural characteristics, such as child rearing practices and approaches to disability and health, of seven ethnic populations served in the region on the delivery of educational services to handicapped children. As a result of this conference, training is being planned for local level educators and parents in three of the States in the region, including California where 200 persons in the State's Special Education Resource Network will be trained. The training will focus on designing and implementing protection in evaluation procedures, procedural safeguards, and programs which are responsive to ethnically and culturally diverse children and families.

Summary

The projects described above represent Federal initiatives over more than a decade designed to enhance the ability of parents of handicapped children and youth to effectively participate in, advocate for, and obtain educational programs of their children. Over the last decade, these projects have also been supplemented and supported by other OSEP projects designed to develop and test new approaches for parent involvement in the education of handicapped children. For example, under the Handicapped Children's Early Education Program, a variety of models have been developed for parent involvement in educational decision-making, advocacy, and service delivery for preschool age children. Under OSEP's research program, projects have examined the effectiveness of alternative strategies for delivering parent training, increasing the involvement of minority parents in their childrens' education, and involving parents in the delivery of educational services. Together, OSEP's support for direct services to parents and for the production of new knowledge related to increasing the effectiveness of parent involvement have contributed to efforts nationally to enable parents of handicapped children to participate with educators in providing appropriate educational opportunities to all handicapped children and youth.

Parent Involvement in the Individualized Education Program

A review of the legislative history of the law, regulations implementing the Act, and the subsequent interpretation of the IEP requirements issued by the U.S. Department of Education (1981) indicates an expectation that parents would be equal participants, along with school personnel, in developing, reviewing and revising their child's individualized education program, and would take an active part in discussions and decisions regarding their child's program. Although the legislative history contains limited reference to the assumptions underlying parent participation, an analysis of this history concludes that Congress intended to provide for parent participation for two reasons (Turnbull, Turnbull and Wheat, 1982). First, parental sharing of information would provide a broader perspective of the child as well as enhance the probability and capacity of families to promote the child's educational program at home. Second, parent participation was designed as an enforceable right, enabling parents to safeguard the interests of the child within the education system and to hold schools accountable for the program they provided.

Three distinct roles were envisioned for parents (Turnbull and Turnbull, 1982). These roles and their underlying assumptions were that

- parents should be part of the educational process from which they had been so often removed - a belief in the role of the parent as a decision maker;
- parent participation should increase the appropriateness of educational services provided - a belief in the role of the parent as advocate and protector of the child's educational rights and interests; and
- parents should be involved in the education of their child at home - a belief in the role of parent as teacher.

Since the enactment of EHA-B, several implementation studies have examined parents' experiences related to these roles in the planning, delivery, and evaluation of their handicapped child's educational program. The parent as an active and equal partner with school personnel in the education of the handicapped child has been the standard against which much of this research has been conducted. The majority of studies which have examined the nature and extent of parent participation was conducted during the early years of implementation, a period during which parents and educators were establishing their new relationship and developing procedures and strategies to support an effective parent/school partnership. The portrait depicted by these studies is not a single image of the parent as an active and equal participant but, rather, multiple images reflecting a diversity in parent responses to the opportunities for involvement provided by the law. This diversity suggests heterogeneity among parents and variability in their interest and capacity to participate in the educational planning and programming process. Each of the parent roles--parent as decision maker, as protector and advocate of the child's rights, and as teacher--are examined below in light of data from such studies on parent involvement since the Act was implemented.

Parents as Decision Makers

The belief that parents should share the rights and responsibilities as decision makers and be an integral part of the education process is based on two assumptions (Turnbull and Turnbull, 1982). First, that parents want to be involved in educational decision making and, when given the opportunity, will take advantage of it; and second, that attending the meeting to plan their child's IEP will enable parents to participate in decision making. Data from several studies of parent involvement in the IEP process suggest significant variability in the extent to which these assumptions hold true.

In a national survey of individualized education programs (1980) conducted by the Research Triangle Institute (RTI), teachers reported that in 70 percent of the cases, parents provided no input in the preparation of the IEP. Other studies have found that while parent attendance is fairly high, parent participation in actual decision making is very limited. An observational analysis of IEP meetings (Goldstein et al., 1982) found that the majority of parent contributions in the IEP meetings were on the topic of personal/family issues, not on such educational issues as evaluation, placement, and curriculum. In its final report of a 5-year study of the implementation of EHA-B in 16 LEAs, SRI International (1982) indicated that while the quantity of parent involvement increased significantly after enactment of the law (i.e., the number of parent-school contacts increased, including parent attendance at IEP meetings), the law had a smaller effect on the quality of parent-school interactions. SRI International reported that five years after implementation, parents often did not make substantive contributions to decisions concerning appropriate programs and services for their children.

The limited nature of parent involvement in IEP conferences and in the decisions made there have been attributed, in part, to the attitude and practices of some school personnel who attend and conduct IEP meetings. For example, several studies of pupil planning in special as well as general education have found that many school personnel believe parents should contribute information about their child but should not or cannot effectively participate in any substantive way in the decision making process. The translation of this attitude into practice may result in only limited opportunity for parent participation. For example, in an observational study of 34 IEP meetings, school personnel stated the purpose of the meeting in only 35 percent of the cases and specified what decisions were to be made in only 12 percent of the meetings; parents were never asked their understanding of the purpose of the meeting or what their expectations were regarding the conference; parental input was requested by school staff only occasionally, and then usually to obtain verification of an observed problem or behavior; and in only 27 percent of the meetings was the language used judged to be at a level parents could understand (Ysseldyke, Algozzine, and Mitchell, 1982). Further, several studies have reported that in the majority of IEP conferences, the IEP was completely prepared prior to the meeting; during the meeting, parents were asked to review the IEP and recommend changes to school personnel. Presenting parents with what may appear to be decisions the school has already reached rather than recommendations, and the failure to directly communicate and provide appropriate opportunities for involvement, can obviously limit parent participation in the IEP decision making process.

While in some cases school personnel inhibit or preclude active parent involvement in IEP conferences and decisions by their attitude or behavior, research findings also suggest that parents vary in their interest in being active as decision makers. The SRI International final report on the longitudinal study found, based on interviews with parents and school personnel, that some parents did not contribute to decisions because they lacked adequate knowledge about program options or because they were intimidated among school personnel they perceived to be the experts. Others, however, abstained because they believe that educational decisions are the appropriate responsibility of school personnel, because they genuinely trust that school staff know what is best for their child, or because they are apathetic or experience other constraints on their ability to participate.

In another study (Lusthaus, Lusthaus, and Gibbs, 1981), approximately 100 parents of children served in resource and special class placements were asked the type of involvement they desired (i.e., no involvement, giving and receiving information, and having control over decisions) in each of nine decisions related to their child's education. Half of the parents sampled indicated that in decisions related to such matters as evaluation, class placement, and student grouping for instruction they preferred a role of giving and receiving information. Control over decisions was desired by a majority of parents in such matters as determining the type of records that should be kept about their child, medical services for the child, and transfer of their child from one school to another.

Although the nature of parental participation in the educational decision-making process may not be what was originally envisioned, it appears to satisfy some parents and represent their desired level of participation. The SRI study concluded that while parent involvement in many cases has not had a significant impact on the handicapped child's educational programming, it has served to increase parent awareness about what their child is doing and to increase communication between parents and the schools. The effects of this parental participation have been reported in several studies as demonstrating a positive relationship between parent involvement and their commitment to the decisions made, and parent satisfaction with their child's educational program (RTI, 1980; Say, McCollum, and Brightman, 1980; Polifka, 1981). The findings from these studies appear to suggest that structured contacts which focus school personnel and parents on the needs and program of the handicapped child have beneficial outcomes for the child, parent, and the school.

Parents as Protectors and Advocates

Several assumptions underlie the belief that parent involvement insures the child's rights to an appropriate education. First, parents can improve the quality of decisions made by teachers; second, parents are effective advocates for insuring the accountability of the school system; and third, parents will represent the interests of their child without regard to their own interests or to the interests of other members of the family (Turnbull and Turnbull, 1982).

Experience in the implementation of EHA-B has shown that many parents are highly interested and successful in being advocates for their handicappped children. However, the assumption is not supported that all parents believe their child needs to be protected from the educational system or that all parents will function as advocates, thereby insuring their children's rights and schools' accountability (Benson and Turnbull, 1986). Many parents view the school with confidence and as an ally in efforts to meet the needs of their handicapped children. For example, in a recently completed study of special education funding and service delivery in Massachusetts, overall parent satisfaction with special education was high among the 78 parents interviewed in 12 communities; a large majority of parents interviewed reported positively on aspects of the special education process, from the identification of children in need of service to IEP meetings, and the delivery of services (Massachusetts Senate Committee on Post Audit and Oversight, 1986). Sixty-six percent of the parents interviewed for this study reported that the school had identified their child's needs for special services, and over 70 percent further indicated they had experienced no difficulty in obtaining services for their child. In another study, 65 percent of parents of mildly and moderately handicapped preschool children sampled identified the importance of finding competent professionals so they could take a break from the educational responsibilities for their child as being a factor in their choice of a preschool (Winton and Turnbull, 1981).

Parental ability to serve as an advocate for their handicapped child requires, in part, that parents have adequate knowledge regarding such matters as their rights and the rights of their child, and the school's special education procedures and programs. As documented in previous Congressional reports, school districts have implemented extensive efforts to provide such information to parents including written brochures describing steps in the planning process, printed statements detailing parents' rights and procedural safeguards under Federal and State law, and verbal elaboration and explanation of such information by school staff at various points during the educational planning process. Yet, some studies of implementation suggest that despite such efforts some parents do not have command of the basic knowledge considered necessary to represent their child's interests (SRI International, 1982; Massachusetts Senate Committee on Post Audit and Oversight, 1986). In the Massachusetts study cited above, for example, parent knowledge regarding their rights under State law and the nature of their child's special education program was determined to be highly variable even though school districts had sent appropriate letters to these parents and parents had attended meetings with school staff who had provided further explanations. While 73 percent of the parents interviewed were aware they could reject a part of their child's educational plan and 66 percent knew they could request a copy of test records, only 37 percent of the parents, whose involvement with special education ranged from one to 10 years, were aware of their right to an independent evaluation at school expense. Further, many of the parents interviewed for this study lacked knowledge of what their children's needs were and the types and frequency of services their children were receiving.

Some parents appear to be unconvinced that their contributions can significantly improve the quality of decisions made by teachers. While they can contribute information about their child and concur with the school's recommendations, some parents express a lack of self-confidence and the skills necessary to function as equal partners with school personnel whose specialized training and experience qualify them to address issues related to assessment, curriculum planning, and behavior management. The Massachusetts study found that while parents were concerned with their children's education and wanted to know what was going on, a prevalent assumption among them was that, regarding their children's education, the school knows best. Authors of this study concluded that this assumption by parents, combined with their limited knowledge, has led some to withdraw, abdicating their decision making to the school.

The ability of parents to represent the interests of their child without regard to the needs and interests of themselves and other family members is a challenge for parents in general and, perhaps, more so for some parents of handicapped children. Families of children who have handicapping conditions are often faced with a unique set of problems as they attempt to adapt to the presence of handicapped children within the family; and at the same time, such families are subject to the same pressures and tensions that every family faces (Gallagher, Beckman and Cross, 1983). Competing demands on their time resulting from work and responsibilities for other children, the added financial costs that some parents of handicapped children may experience, and the attention and structure that may be required in the home in order to manage and care for their handicapped child are but a few of the factors that contribute to stress experienced by some families of handicapped children. The desire to protect their handicapped child from failure or rejection, or to reduce stress within the family can lead parents to advocate for programs and placements which educators might view as too restrictive or otherwise inappropriate, given the educational goals they have for the child (Turnbull and Turnbull, 1982). Given the interdependence of the family system, it may be unreasonable to expect parents to separate entirely the interests of their handicapped child in the educational planning process from those of the family at large.

Parents as Teachers

Underlying the belief that involvement in the development of their child's educational program would assist parents in supporting their child's educational program at home was an assumption that handicapped children will experience greater progress when parents and teachers implement a coordinated instructional approach (Benson and Turnbull, 1986). There is little doubt that parents teach their children through their daily interactions and that consistency between the home and school can be of benefit to the child's continued progress in achieving educational goals and objectives. In fact, research has shown that many parents of young handicapped children have achieved impressive success as teachers of their own children, by providing continuity, opportunity for practice and reinforcement (Turnbull and Turnbull, 1982; McConkey, 1985).

However, being an effective teacher of one's own child can be a formidable undertaking, for some parents requiring skill acquisition, restructuring of the home environment, and realigning of family priorities. Depending on the nature and extent of the child's needs and competing responsibilities in the family that require parental attention, serving as teacher can also be stressful. While some parents have or can acquire the knowledge, interest, and resources necessary to actively carry educational approaches over into daily living situations in the home, it appears that others may prefer more limited involvement or may prefer to emphasize aspects of their child's development which receive less attention during the school day (Turnbull and Turnbull, 1982). While parental support for educational goals is desirable and worth working towards, it is evident that not all parents can or will choose to deliver the educational program in the home.

The cumulative experience of parents in the education of handicapped children as described in studies of implementation suggests there is considerable variation in the nature and extent of parental involvement in the development and implementation of individualized education programs. While some parents have assumed an active and equal role in their partnership with the schools, others have taken on a more limited form of involvement -- some by choice, some because they have not had appropriate opportunities to acquire the skills, knowledge and confidence they need, and some because opportunities for participation have not been provided. The challenge to educational agencies, organizations, and individuals interested in improving the effectiveness of the parent-school partnership is to help parents recognize that they have expertise that is valuable to their child's educational program, that they can acquire the skills and knowledge necessary for participation, and that they have both a right and responsibility to participate in whatever ways possible for the benefit of their handicapped child.

Dispute Resolution

In establishing the due process provisions of EHA-B, Congress recognized that differences could arise between parents and schools over the educational program of the handicapped child. In the legislative history of P.L. 94-142, Congress expressed the expectation that the due process provisions of the law would provide parents and schools an alternative to the judicial system and the courts for resolving such differences over a handicapped child's education. No longer should the courts be the main arbiter of differences between parents and the schools. As an alternative to judicial recourse, framers of the law viewed the due process hearing as a means of providing a relatively informal, inexpensive and prompt remedy when agreement could not be reached in the educational planning process (Clune and Van Pelt, 1985).

Traditionally, due process hearings have been used to guarantee accuracy in fact finding, participation in decision making, and the perception of fairness to persons faced with the potential loss of liberty or property through acts of government (Friendly, 1975). The procedures and rights specified in EHA-B are based on established principles of administrative due process and, as such, satisfy all the major elements of due process generally thought to be essential to a fair hearing (Kuriloff, 1985). Section 615 of EHA-B provides that both parties in a dispute have the right to be accompanied by counsel; to make written and oral arguments; to confront, cross-examine and compel the attendance of witnesses; to receive a written or electronic verbatim record of the hearing; and to receive a written account of findings of fact. Further, the hearing decision must be based on the strength of the evidence provided within the context of the requirements of the applicable State and Federal laws. A recently enacted amendment to Section 615, the Handicapped Children's Protection Act of 1986, authorizes the award of reasonable attorney's fees to parents or guardians of handicapped children who prevail in due process hearings or in subsequent civil actions.

Previous reports to Congress have described various aspects of the implementation of the due process provisions of EHA-B. These have included descriptions of the types of educational issues over which parents and schools disagree, how States select, train, and review the performance of hearing officers, and procedures States employ to assure the timely implementation of hearing decisions. In addition, these earlier reports indicated that while States had clearly developed the capacity to implement the due process hearing procedures, unanticipated outcomes had occurred. In particular, these reports indicated that hearings had become both more adversarial and costly than had been originally anticipated.

This report examines in more detail these unanticipated outcomes, based on the findings of implementation studies conducted over the last several years on the legal orientation of due process procedures. Next, study results related to parent and school perceptions regarding the fairness of and their satisfaction with due process hearings as a means of resolving educational disputes are presented. Finally, findings on the use and impact of mediation procedures as a pre-hearing alternative for resolving educational disputes between parents and the schools are discussed.

Due Process Hearings

It was anticipated that the due process hearing would afford schools and parents a relatively informal and cost-efficient means to settle their differences over matters associated with the educational program of a handicapped child. Evidence from several studies conducted since the implementation of the due process requirements of the EHA-B suggests, however, that due process proceedings have taken on the climate and characteristics of judicial proceedings (Budoff and Orenstein, 1982) and, for the schools and for some parents, involve considerable financial cost.

Legal Orientation and Costs of Hearings

The reliance on legal professionals, and the extensive use of witnesses and exhibits by both parents and the school characterize due process hearings in several States. For example, special education due process hearings in several States (e.g., New Jersey) are conducted by the State court of administrative law which is responsible for conducting such proceedings across departments of State government. The operational procedures of these courts are distinctly legal in nature, where hearings are conducted by administrative law judges serving as hearing officers. In other States, only attorneys have been eligible to serve as hearing officers (e.g., Florida, Nebraska, North Carolina, and Virginia). Given their background and training, it would be expected that their preference for the conduct of hearings would lead them to reliance on practices reflective of legal proceedings. However, even in States where hearings are conducted by educational agencies themselves and where educators and others whose background is not legal serve as hearing officers (e.g., Michigan), hearings are increasingly described as formal, adversarial proceedings characterized by their legal procedures and adherence to legal principles (Simpson, 1984).

Studies on the implementation of due process hearings in special education as well as analyses prepared by some State educational agencies on hearings conducted in their States suggest that attorneys play a major role in the resolution of educational disputes serving either as parent or school representatives. In a sample of hearings conducted in 1983-84 in a State which that year held nearly 300 hearings, attorneys represented parents in 89 percent of the hearings and advocates represented another six percent; school districts in this sample were represented by attorneys in 81.5 percent of the cases (RIEP, in progress). In another State that same year, the SEA reported that in the 18 hearings conducted, attorneys represented school districts in 61 percent of the hearings and parents in 67 percent of the hearings; parents in that State represented themselves in only 17 percent of the hearings that year (NASDSE, 1985). In all hearings conducted in a third State before 1983, parents represented themselves in only five percent of the hearings, used attorneys 81 percent of the time, and used advocates in the remaining 14 percent of the cases; while school districts in the same hearings employed legal representation at a signficantly lower rate, attorneys were used in nearly 47 percent of the cases (Davis, 1983).

In numerous studies, parents and school officials who have gone to a due process hearing report that legal or advocate representation is essential for both sides because of the technical nature of the hearing proceedings, the need to clearly organize and present each side, especially in cases where the issues are complicated, and to equalize the perceived imbalance between parents and the schools in the hearing process. LEA administrators surveyed by one study confirmed the importance of counsel for both parties in a dispute, but reported that legal representation was responsible for enhancing the adversarial nature of hearing procedures (Romano, 1982).

The extensive use of witnesses, both from inside and outside the school, and the importance of written evidence in establishing the facts of the case contribute to the legal orientation of the due process hearing. A recent study of a sample of hearings in one State found that all parties called witnesses in presenting their cases (RIEP, in progress). Witnesses testifying in hearings on the parent side averaged three (ranging from one to six), and on the school side averaged nearly five (ranging from one to 10). These findings are largely consistent with the results of a study in another State on a sample of hearings conducted in the 1980-81 school year (Simpson, 1984). This study found that the average number of witnesses for parents was 3.8 (ranging from 0 to 10) and for schools was five (ranging from two to nine).

Another factor contributing to the legal climate of due process hearings is documentation. The RIEP study found that the number of written documents, serving as exhibits, submitted in each case averaged 28 for parents and 29 for schools. Such documents included the child's educational plans for several years, progress reports, teacher assessments, school and independent evaluation results, letters between parents and school personnel, and treatment reports of professionals outside the school.

Parents and school districts experience financial as well as emotional costs related to the hearing process. The financial cost of using attorneys, calling expert witnesses to prepare and present testimony, and managing each party's case can be significant both for school districts and parents. Added to these costs are those associated with administering the hearing, such as for preparing transcripts and expenses of the hearing officer. However, when contrasting the relative ability of parties in the dispute to finance their case, parents believe they bear the heavier burden. They contend that the school district often has the resources of the organization to finance hearing costs while parents often must finance directly the costs they incur (Simpson, 1984). Whereas school staff and attorneys can prepare for and participate in a hearing during the course of their work day, parents must frequently take time off from work to obtain an independent evaluation, arrange for witnesses, develop their case, and attend the hearing.

Few studies have examined the cost of due process hearings to parents and school districts. The Third Annual Report to Congress reported school district hearing costs ranging from $750 to $4,500 to cover the expenses of attorneys and school staff who prepare and present testimony at the hearing, and for parents costs of $1,000 to $3,500, primarily for attorney fees and expenses. One State surveyed by NASDSE in 1985 reported that in 25 hearings recently conducted in that State, the average combined costs to parents and schools was $7,000; hearing costs in this State ranged up to $17,000, and parties were accompanied in all hearings by attorneys. In a study of hearings conducted at the local level in 1980-81 in another State, hearing costs, direct and indirect, reported by school districts ranged from approximately $1,000 to $16,300, with the average being nearly $6,000 (Mange and Henley, 1982).

In contrast to the financial costs, the emotional costs associated with the due process hearing cannot be quantified. However, both parents and educators report that participation in a due process hearing can produce stress and anxiety. Parents report that the emotional costs of using the hearing system are high (Budoff and Orenstein, 1982), resulting from professionals' questioning their motives, from the pressure of developing and presenting their case, and from what sometimes seem to be endless delays in obtaining and implementing a hearing decision. Similarly, school personnel report experiencing loss of morale and self-confidence when their professional judgment is publicly questioned and when their interest in the child's welfare is impugned.

Fairness and Satisfaction with Due Process Procedures

Of prime importance in determining the effectiveness of due process procedures is the extent to which they achieve the goal of providing a fair means for reaching an appropriate resolution of an educational dispute. Studies conducted to date have not provided an objective assessment of the fairness and appropriateness of due process hearings in resolving disputes regarding a child's educational program. In fact, such assessments are particularly problematic because of both definitional and measurement issues. For example, while it would be possible to define fairness to mean that due process hearings are equally accessible to all parents of handicapped children, or that they operate in such as way that both schools and parents are equally able to influence the hearing decision, such definitions are difficult to measure. All parents may have been informed of their right to due process, but may not understand when to exercise it or may choose not to do so because of a reluctance to confront the school or to incur the financial costs.

Determining whether due process hearings result in appropriate decisions is equally difficult, particularly in light of the subjective nature of the term "appropriate." Not only can parents and educators be expected to hold differing views of what is an appropriate program, given the unique perspectives from which they view the child, but there is evidence to suggest that professional educators, working under ideal and non-adversarial circumstances, cannot always agree on either the assessment or placement of a handicapped child (Kuriloff, 1985). Studies conducted to date have focused primarily on the extent to which parties to a dispute believe that they have been accorded their rights under law, whether they believe they were each treated equitably in the process, and whether they believe that the decisions rendered were based on the evidence presented.

Several studies conducted since 1982 have examined the perspectives of a sample of persons who have participated in special education due process hearings regarding the fairness of this procedure and their satisfaction with their treatment and the decision that was rendered. While these studies have certain limitations (e.g., use of small, non-random samples of hearing participants and reliance on retrospective perceptions of their experience without verification of fact), their results, based on experiences in different States, provide largely consistent results regarding parents' and school administrators' perceptions of the fairness of hearing procedures and their satisfaction with the appropriateness of the due process hearing as a means of resolving educational disputes. In two of the studies cited, hearing decisions were reported to favor schools over parents in two out of three cases (Goldberg, 1985 and Romano, 1982). In a third study, schools were successful slightly more often than parents (Simpson, 1984).

Procedural fairness. The majority of parents report they had been accorded many of the due process rights to which they were entitled under law (Goldberg, 1985 and Romano, 1982). For example, most reported they had received notice of the hearing in time to prepare their case and had been provided access to their child's records to use as evidence, although in both studies many parents reported that the school did not provide adequate explanation of either the hearing procedures or such records as their child's evaluation results. Further, 45 percent of parents in one study reported they were not informed of the availability of legal assistance or independent evaluation (Romano, 1982), and, in another, only 27 percent of the parents had learned of their right to request a hearing from school personnel (Simpson, 1984). In explaining their failure to inform parents of certain of their due process rights, some school officials reported there seemed no need to do so if the parent had already secured the assistance of an advocate or legal counsel.

The majority of parents and school officials believe they or their representatives had the opportunity at the hearing to present most or all of their case to the hearing officer, although, in general, parents reported they had less opportunity than did school officials. Goldberg and Romano report that more than 95 percent of school administrators indicated they had the opportunity to present all or most of their case in the hearing, while in the Simpson and Goldberg studies 40 and 19 percent of the parents, respectively, reported they had no opportunity to present their side of the case. Parents cited various reasons for their response regarding the adequacy of the opportunity they had to present their case. Some parents commented that having chosen to be represented by an advocate in the hearing, they themselves were limited in what they could say and when they could speak. Others reported that the hearing officer limited the presentation of their side of the case because of time constraints (Simpson, 1984).

A majority of parents and school officials believe they were treated fairly in the hearing process. However, parents were significantly less positive in this respect than were school officials. For example, while most (90 percent) school officials believed that the hearing had been conducted fairly, only half of the parents shared this perception; further, 40 percent of the parents indicated that hearings were totally or substantially unfair (Goldberg, 1985). Romano reported that 35 percent of the parents he studied indicated a belief that their hearing officer did not act in an impartial manner, while one-third of the parents in another study indicated that the hearing, regardless of hearing outcome, had not been conducted fairly by the hearing officer (Simpson, 1984).

Two of these studies compared participants' perceptions of fairness to hearing outcome. While one found a significant correlation for both parents and administrators between their perception of procedural fairness and hearing outcome (Goldberg, 1985), the other found no such correlation (Simpson, 1984). The comments of the majority of parents in these studies indicated they believe that hearing officers were knowledgeable, applied the rules of the hearing consistently to both parents and school personnel, and treated each side with respect. In contrast, parents who did not believe they had been treated fairly reported that hearing officers seemed, on the basis of the questions they asked, to have reached their decision about the case before all the evidence had been presented, and, in some cases, did not follow the established rules.

Parents, in contrast to most school officials, disagree about the extent to which the decisions rendered by hearing officers were based on the evidence presented at the hearing. While 81 percent of school administrators were positive in this regard (Goldberg, 1985 and Romano, 1982), only half the parents in one study (Goldberg, 1985) and 60 percent in another (Romano, 1982) agree that decisions were totally or substantially based on the evidence presented. For both parents and school administrators, one of these studies (Goldberg, 1985) found that their perceptions regarding the basis for the hearing decision was significantly correlated to hearing outcome. While over 90 percent of administrators in these two studies reported that the hearing officers adequately explained the basis for their decision, somewhat fewer of the parents agreed. Parents in one study claimed that the terminology used in the decisions was often legalistic and the decision itself vaguely written (Romano, 1982).

Participant satisfaction. In rating their overall satisfaction with the hearing process they participated in and with the hearing results (based on a 7 point scale from none to total satisfaction), one study found significant differences between school officials and parents (Goldberg, 1985). Whereas over 80 percent of school officials were more than half satisfied with both the hearing process and outcome, only 38 percent of the parents shared this satisfaction. For both parents and administrators, hearing outcome was significantly correlated with their overall satisfaction with the hearing process and results. Total dissatisfaction with the hearing process was reported by 49 percent of the parents and 9 percent of the LEA administrators. In another study, similar findings were reported regarding parental satisfaction with their hearing experience (Simpson, 1984).

While citing some problems, these studies indicate that a majority of school officials and parents who have used due process as a means of resolving educational disputes report that it is largely an equitably administered procedure. They further report that as a safeguard of the child's educational interests it is an essential protection that should not be abridged. Its value is seen not only as an ultimate protection but also as a form of leverage for use by both parties in their deliberations over the child's educational program. However, neither group reported the due process hearing to be a good way of resolving their differences. In one study (Goldberg, 1985), 67 percent of parents and one-third of school officials in retrospect considered the hearing to be a negative means of settling their differences, while 47 percent of school administrators and 11 percent of parents found it to be positive. This study found no correlation between hearing outcome and participants' opinion of the hearing as a fair means of settling differences. Although 73 percent of the parents interviewed for another study

(Simpson, 1984) said they would use due process again if other forms of dispute resolution were not available, 40 percent asserted that the hearing was not a good way of resolving the educational dispute.

The studies cited above, along with several conducted earlier and reported in previous reports to Congress, create two distinct views on the implementation of due process procedures. On the one hand, due process is considered by school administrators and parents to be an essential and necessary guarantee of the child's right to an appropriate educational program and the parent's right to challenge the recommendations of the school. On the other hand, however, as a result of its legal orientation, many parents and administrators who have participated in a due process hearing consider hearings to be ill-suited to resolving educational disputes. Among the negative aspects reported by both groups are the loss of control over decisions affecting the child, the development of adversarial attitudes and tension between school personnel and parents, and the personal and organizational resources that are required.

For some parents and schools, the due process hearing represents the first time they have substantially disagreed about the educational program of a handicapped child. However, several studies have documented that for many the due process hearing is only the public acknowledgement of long-standing differences and a history of disagreement that has existed between the school and parent (Budoff and Orenstein, 1982). Poor communication, lack of trust, delays in acting, and the lack of a cooperative attitude by either party are only of few of the factors that characterize the relations between some parents and school personnel. While the due process hearing may put an end to a particular dispute, for some it does not end the conflict that has evolved over a long period of time (Fiedler, 1985; Budoff and Orenstein, 1982).

Adversarial methods of resolving differences are not well suited to conflicts between parties who will have a continuing relationship (Yoshida, 1979; Fiedler, 1985). Such methods can be divisive and focus participants attention on winning rather than on solving problems of mutual interest. Unless a child moves or otherwise changes programs, it is likely that after a hearing parents and school officials will need to work together, particularly as the child's needs change over time. Yet, for some parents and school personnel, the due process hearing appears to do little to resolve long-standing conflicts between them or to facilitate cooperative and constructive relations in the future.

Limitations and consequences associated with due process have led many parents and educators to recommend that alternatives for resolving educational disputes be sought and implemented (Fiedler, 1985; Goldberg, 1985; Simpson, 1984; Budoff and Orenstein, 1982). Chief among such recommendations are training for parents and educators to improve their problem-solving and communication skills and, thus, minimize the development of conflict; pre-hearing conferences in which a hearing officer or other neutral party can help disputing parties consider alternative solutions to their differences; and alternative, less adversarial procedures for resolving disputes such as mediation. Over the last decade, many State and local educational agencies and parent organizations have implemented these and other procedures for limiting and resolving conflict. The following section examines the effect of one of these procedures, mediation, which is being used increasingly as a prior step to due process hearings for resolving disputes between parents and schools.

Mediation

The Sixth Annual Report to Congress cited various procedures designed to facilitate the resolution of educational disputes between parents and the schools. Among the pre-hearing alternatives commonly implemented by States to facilitate dispute resolution is mediation. While neither mediation nor other procedures designed to facilitate the resolution of educational disputes is mentioned specifically in P.L. 94-142, a comment to the regulations related to the due process provisions of the law noted that mediation has been found by some States to be successful in resolving disputes (Section 300.506). This commentary suggested that the use of mediation could be considered as an intervening step prior to a due process hearing, so long as such use did not deny or delay a parent's right to a due process hearing.

The use of mediation as a procedure for resolving disputes between parents and schools has expanded since the law was enacted. In 1976, Massachusetts was the first State to incorporate mediation procedures into its due process system. In a 1982 survey of State educational agencies, NASDSE found that 11 States had incorporated mediation or a similar form of pre-hearing dispute resolution process into their special education regulations, either as suggested procedure or as an option that must be offered to parents and schools. At that time, another 22 States reported that the SEA encouraged the use of pre-hearing alternatives through nonregulatory means. To support the implementation of such alternatives, SEAs developed training materials, offered training for mediators, and/or developed operational guidelines for conducting mediation proceedings.

A study of due process hearings and mediation in special education in 48 States (Budoff, Orenstein, and Sachitano 1986) found one year later than the NASDSE survey that in the 1982-83 school year 13 States had regulations in place that specifically encouraged or required that pre-hearing dispute resolution procedures be offered to parents and schools. This study further found that 18 SEAs had established mediation programs designed to assist parents and schools to resolve their differences prior to resorting to a due process hearing. In addition, this study identified four other States in which no formal SEA program had been established but where on an informal basis SEA staff sometimes become involved in efforts to settle differences between parents and school personnel prior to a due process hearing; such interventions may occur at the request of parents or LEAs, or at the suggestion of the SEA in States where the SEA receives notification that a dispute has developed or a hearing has been requested.

This expansion of SEA efforts to broaden the alternatives available to parents and schools for the resolution of disputes that arise in developing and delivering an appropriate educational program for a handicapped child appears to have emerged for two major reasons. First was to permit schools and parents an opportunity to settle their differences without incurring the costly, adversarial and emotionally taxing experience of the due process hearing, structured as it is on procedural detail and rules of law. Second was to permit disputing parties to repair or preserve a level of respect and communication that would enable them to work together productively in future educational planning efforts for the handicapped child.

Three studies, either recently completed or still underway, have examined the effectiveness of mediation programs administered by SEAs. One of these, sponsored by the National Institute for Dispute Resolution (Singer and Nace, 1985), examined mediation programs in two States. The second, currently being conducted by the Research Institute for Educational Problems, Inc. (RIEP, in progress), has surveyed due process and mediation practices nationally. Finally, in 1985 NASDSE surveyed administrators of SEA mediation programs in five States and parent advocates in two of these States regarding implementation of the mediation process. The findings and implications of these studies related to the goals, procedures and outcomes of SEA mediation programs provide the empirical foundation for this section.

Goals of Mediation

Terms such as negotiation and compromise are frequently used to describe how differences are resolved and agreements achieved using the mediation process. For mediation in special education, negotiation seems to place too much emphasis upon a particular strategy which is often associated with management-labor disputes. The issues in special education mediation do not involve just two parties seeking benefits or reduced costs; they involve the development of an appropriate educational program for a child which consists of multiple and sometimes complex service components, resulting from agreements forged out of sometimes differing perspectives among and between educators and parents. During mediation, the focus is the child's best interest which the mediator is charged with protecting. Compromise, unfortunately, suggests that parties may be conceding or giving up important points and, possibly, jeopardizing the welfare of the child. Neither term denotes effectively the problem-solving nature of the mediation process.

The SEA representatives surveyed by NASDSE (1985) indicated that, although parties may have to change their positions in order to reach a satisfactory agreement, neither must feel that they lost an important point. Rather, one SEA representative characterized the primary goal of mediation to achieve resolution of the present dispute through the collaborative efforts of both parties working in the best interest of the child. If such collaboration can be achieved, the mediation process will, hopefully, enable parents and school personnel to work together productively in their future educational planning efforts.

Mediation Procedures

In the three studies of special education mediation, several variations in the procedural implementation of mediation programs administered by SEAs were found. The mediation process is triggered in any one of several ways, depending on the State and its due process procedures. A request for a due process hearing in some States, or parental rejection of a child's educational plan in others, initiates the mediation process. In such States, mediators or other SEA staff contact school personnel and parents to determine their willingness to attempt to resolve their differences through mediation. In other States, particularly those where due process hearings are conducted at the local level, parents or school personnel must initiate contact with the SEA to indicate their interest in mediation. The RIEP study identified one such State where the SEA heavily advertises its mediation program throughout the State. The SEA attempts to schedule the mediation as soon as possible so that the parties' right to a timely hearing is not abridged. The parties may waive the Federal 45-day timeline (CFR 300.512(a)) between a request for a hearing and the hearing decision, and on occasion do, in order to utilize the mediation process. Prior to the mediation, the mediators in some States familiarize themselves with the history of the dispute and each party's position through discussions with the parents and school staff; in others, mediators make no attempt to learn more than the basic nature of the dispute until the mediation proceeding when both parties are present.

While some variations in the mediation proceeding exist, such as their length and how mediators structure specific elements of the proceeding, the mediation process typically begins with a joint session between the parent and school personnel. The mediator emphasizes the principles of confidentiality and flexibility underlying the mediation process and focuses attention on the collective interest of all parties to achieve agreement about the child's educational program. The mediator establishes him or her self as a facilitator whose role is not to impose a settlement but, rather, to assist the parties to resolve their current differences. Having established their role, the mediator requests the parents to describe their child, the disputed issue(s), and what they desire as an appropriate resolution. While a parent adviser or advocate may be present, parents most often speak for themselves (RIEP, in progress). The school is then asked to present their position and the reasons for their recommendations. During or after these presentations the mediator intervenes as necessary with questions and comments to further clarify and define the specific differences between the parties and to identify the issues to be addressed. This definitional phase is of particular importance because its outcome, a clear statement of the issues to be mediated, becomes the focus of subsequent dialogue between the mediator and each party.

While disagreements are sometimes resolved at this initial joint session, more typically the mediator next meets privately in caucus with each party to discuss the issues, to examine alternative solutions, and to work out each aspect of the agreement. It is at these private sessions where differences among school personnel may surface, where the mediator may test the limits and flexibility of each party's position, and where give and take can occur in an environment that is nonthreatening. The mediator shuttles back and forth between the two parties communicating progress towards a settlement until either an agreement or impasse appears to have been reached. This cycle of joint and private sessions may occur once, or may be repeated several times when opportunities for face to face dialogue between parents and school personnel seem advisable. At a final joint session, the agreement is outlined, committed to writing by the mediator and signed by each party. In some cases, final agreement is postponed to permit parties to consider options that have been suggested or to obtain additional information.

The mediated agreement usually consists of statements of what the parties agree to without the findings of fact and law that are included in due process hearing decisions, and in some States becomes part of the child's IEP. If either party fails to implement their part of the agreement, the parent and school may return to mediation or, more likely, proceed to a due process hearing. If a mediated agreement cannot be reached, the parties may reconvene to continue mediation at a later date or proceed to a due process hearing.

Role and training of mediators. SEA representatives and parent advocates report that the role of mediator is a demanding one. In the five States surveyed by NASDSE (1985), the mediators were usually SEA employees who have professional and administrative experience in either education or other human service fields. Some have other SEA responsibilities while others serve only as mediators. In another State studied by the NIDR (1985), mediators work on contract to the SEA. Backgrounds of mediators in this State include attorneys and former school administrators and teachers.

SEA representatives surveyed by NASDSE (1985) identified a specific set of desirable qualifications for mediators. They must have knowledge of special education laws, regulations, and their interpretations to ensure that agreements they draw up are legally consistent with State and Federal requirements. They need to have sound problem-solving and interpersonal skills because they must help the parties identify those issues that can be resolved and those that cannot; in addition they often need to provide information to parents who are uninformed about or less experienced than school personnel with school and educational practice. However, mediators must tread a fine line between helping parents participate more effectively and the perception that providing such information compromises their neutrality. Further, mediators must be informed about currently available service and program options throughout the State in order to suggest alternatives that may not have been considered by the disputing parties. Finally, they must be skilled in writing clear, understandable, and precise agreements which the parties can follow and measure implementation against.

This latter skill was highlighted by parent advocates as being especially important (NASDSE, 1985). They reported that a vaguely or imprecisely written agreement is harder to implement to each party's satisfaction than one which clearly articulates who will do what and when. Advocates surveyed added that if the agreement is not satisfactorily implemented, the parties may lose trust in each other, disown the mediation process and, rather than attempt mediation again, proceed to a due process hearing to pursue their dispute.

Given this demanding role, most SEA representatives reported to NASDSE (1985) that they conduct extensive training programs which differ more in length than in content or approach. Training is an ongoing process, beginning with an initial training where prospective mediators enroll in workshops which range from 1 to 3 days. Depending upon the background of the candidates (only one State recruited individuals with extensive mediation experience but not necessarily in special education disputes), training sessions cover the concept of mediation and its place in the due process system, special education laws and regulations, and various dispute settlement approaches and techniques. During these sessions, candidates observe videotapes of mediations and participate in simulations of mediation.

Candidates are then assigned to an experienced person in order to co-mediate a dispute. Eventually candidates mediate their own case while an experienced mediator observes. Even with careful preparation, some mediators experience problems, usually reported to the SEA by the disputing parties; after a review of their performance, where justified, some are removed. Those who remain meet to discuss changes in and interpretations of the law and more effective ways of handling particular types of issues or situations. In four of the five States surveyed by NASDSE, mediators are encouraged to attend workshops, such as those offered by a national professional organization of mediators, to develop skills to improve their dispute settlement skills. In the New England region, special education mediators have formed their own association to improve their skills and to bolster professional identity (RIEP, in progress).

Parent and school representation. Whether to consult with an advocate or attorney prior to going to mediation or to bring such an advisor or a friend to the mediation proceeding is a decision parents and schools face. In its study of special education mediation in two States, the NIDR reported that whether their concerns are real or imagined, parents clearly think that schools have significantly more power than they do. Parents they interviewed pointed out repeatedly that school districts are experts in the law and the procedures, while parents are uninformed and inexperienced. Further, parents reported feeling overwhelmed by the number of school personnel who are present at some mediations. This study reported that while the district director of special education may attend the mediation alone after being briefed by staff, others bring the entire IEP team or those staff who are considered most knowledgeable about the issues under consideration. While schools are encouraged to bring only those staff whose presence is needed to reach an agreement, it is reasonable to assume that for some parents any imbalance in the number of persons in attendance may result in their feeling overpowered, insecure, or defensive.

Based on the perspectives of parent advocates (NASDSE, 1985), it appears that an advocate or advisor can play an especially important role prior to mediation. They can help parents to review their child's records, educational plans, and past communications with the school, help parents to narrow and identify their specific issues, and help the parents to determine the program, service, or action they want. This consultation can be of benefit to parents not only in focusing their concerns but also in exploring alternatives which they may not have known about or considered. Further, a parent advisor can play an important role before the mediation by informing parents about their rights under Federal and State law and about what these laws prohibit and require. Prior to the mediation, a well-informed advisor can help the parents assess what the likelihood of their position would be if they eventually choose to pursue their dispute in a due process hearing. As a result, prior consultation with an informed advisor can markedly improve parent confidence and ability to effectively participate in the mediation proceeding and to assess the reasonableness of the agreement that is reached.

The mediator can and sometimes does provide advice to parents within the bounds of his or her neutrality. Parent advocates noted, however, that there are limits to how much the mediator can be expected to counsel and inform parents. Especially in cases where parents are unclear about or unable to articulate their issues, or where they are unfamiliar with school practice and programs, advance preparation results in more efficient use of the mediation proceeding and assures that all relevant parent concerns are surfaced and addressed. Some SEA representatives as well as the parent advocates in the NASDSE (1985) study reported that the moral support provided by the presence at mediation of a parent advisor or a friend, their ability to remain unemotional, and their ability to speak for parents when needed are important considerations for parents in determining whether to seek advice and/or representation at a mediation. While mediation is intended as a forum for parents and school personnel to reach an agreement in a setting where legal maneuvering and strategy have little or no place, the process has a procedural structure that is new to parents and represents for many an encounter with school staff with whom relations may already be strained or who are perceived to have the upper hand.

Outcomes of Mediation

The success of mediation as a process for resolving special education disputes is difficult to assess. The studies cited above on SEA-administered mediation programs provide some preliminary evidence of the extent to which the intended outcomes of mediation are being met. Their findings indicate that the process permits parents and schools to settle differences in a less costly, adversarial, and emotional manner, and that mediation contributes to the maintenance or development of productive relations between parents and school personnel considered important in ongoing educational planning for the handicapped child. The fact that parents and school administrators choose mediation over a due process hearing at a high rate and a significant portion of mediations result in settlements is one indicator of its success (Singer and Nace, 1985; NASDSE, 1985; Budoff and Orenstein, 1982). The extent to which mediation is used in selected States, the costs of mediation to the parties involved; and the satisfaction of education administrators, parents, and parent advocates with the mediation process are discussed below.

Extent of use. In 14 of the States surveyed by RIEP, 56.7 percent of the parents and schools agreed to mediate their disputes after filing a request for a due process hearing in the 1983-84 school year. SEA representatives surveyed by NASDSE reported that in the 1984-85 school year, parents and schools agreed to attempt to resolve their dispute through mediation in 70 percent of the cases where a due process hearing had been requested. Further, three States in the NASDSE study reported a decline in the number of due process hearings after mediation became a widely available alternative. One State reported 400 due process hearings in 1977 and 138 in 1982, representing a 66 percent decline; a second State reported 105 due process hearings in 1980 and 30 in 1984, a decline of 71 percent; the last State reported that an average of 360 due process hearings were held in each year from 1980 to 1982, while 241 hearings or 33 percent fewer were held in 1984. Attributing this decline to the use of mediation, however, is conjectural since the NASDSE study (1985) did not directly focus on the reasons parents and schools selected mediation versus a due process hearing.

The RIEP and NIDR studies examined the settlement rates of SEA-administered mediation studies. The RIEP (in progress) findings indicate that 75 percent of the mediations conducted in 1982-83 resulted in agreements between parents and the schools. In States which conducted more than 50 mediations that year, the settlement rate ranged from 60 to 70 percent. In many of the States which historically had conducted relatively few hearings, RIEP found that mediation had virtually replaced due process hearings. Six States with fewer than 17 hearing requests settled 94 percent of them through mediation and conducted few or no due process hearings. The NIDR reported that in one of the States it studied where mediation had been operating for over 3 years, the procedure was successful in resolving disputes in 45.5 percent of the cases in 1981, 60 percent in 1982, and 68 percent in 1983. In that State, the percentage of all cases filed each year that are resolved through mediation also increased. In 1981, 26 percent were resolved by mediation and, by 1983, this figure had increased to 37 percent.

In another State that was included in both the NIDR and NASDSE study, mediation resulted in the successful resolution of 70 percent of all requests for a due process hearing several years ago. By 1982-83, however, this rate had stabilized at 51 percent. The NIDR reported that this decreased resolution rate is attributable to two developments. The first is an increase in the difficulty of the issues presented; it appears that at least some of the easier cases are settled by parents and schools without recourse to mediation or due process. The second development cited by NIDR was local revenue restrictions which require some districts to have a hearing officer's decision as justification for any significant new expenditure.

SEA respondents in the NASDSE study (1985) reported that parents and schools seem less likely to select mediation over a due process hearing under certain circumstances. Reasons they cited for going directly to a due process hearing included cases in which

- the parties have been engaged in a long-standing dispute over many years, are unwilling to discuss the case any further, and want an impartial person to determine the outcome;

- the parties have rigid positions and have clearly indicated an unwillingness to change their positions;

- attorneys, many of whom generally endorse the use of mediation, desire to "set a precedent" in a due process hearing or avoid the introduction of a less desirable option at mediation which might later weaken the case if it goes to a hearing;

- other governmental agencies which are involved in disputes do not want to share in expenses for a student's program, preferring to take their chances in a hearing; and

- parents are seeking tuition reimbursement after having unilaterally placed their child in a private school.

Mediation costs. Regardless of whether requests for due process hearings are directly affected by mediation, mediation reduces the costs and burdens of using a State-level due process dispute settlement procedure. The cost to the SEA for conducting a mediation proceeding in these States for such items as the mediator's salary, travel and per diem is considerably less than for comparable costs associated with a due process hearing. While the hearing officer typically spends a substantial amount of time after the hearing reviewing the testimony and exhibits presented by witnesses and preparing the written decision, the mediator is often able to prepare the agreement before the mediation proceeding ends. The five SEA representatives in the NASDSE study (1985) report that mediation usually costs parties less than $500 and that this outlay is directly attributable to whether the parties use attorneys or advocates who charge fees.

The use of parent advocates or attorneys varies widely, both within and across States. Across the 18 SEA-administered mediation programs surveyed by RIEP, parents were represented in 50 percent of the cases, more frequently by advocates than by attorneys. Based on limited data from the NASDSE and NIDR studies, whether parents are represented at mediation is greatly influenced by the availability of well-publicized advocacy services. When contrasted to the costs of a due process hearing cited earlier in this chapter, the mediation process appears to cost participants substantially less.

Participant satisfaction. That parents and schools opt for mediation prior to a due process hearing in well over 50 percent of the cases in the States surveyed by NASDSE, NIDR, and RIEP suggests that mediation is regarded as a positive and preferable procedure by many. Based on interviews conducted with local school officials, NIDR reported that administrators are positive about mediation, particularly when contrasted with a due process hearing. School officials cited the financial, emotional, and personnel costs of a due process hearing, as well as the destruction of positive relations between parents and schools that so often results from a hearing. With regard to parent satisfaction, NIDR findings were also positive. Their participatory role in the decision process, the feeling that their concerns were listened to, and the neutral yet supportive role of the mediator were all cited by parents as reasons for their satisfaction. While some parents expressed negative reactions over such factors as the cost (where paid advisors were used) and the perceived stigma of having disagreed with the school, NIDR reported that even these parents said they would use the process again if a dispute arose in the future.

Parent advocates surveyed by NASDSE in two States reported that the mediation process is highly effective, not only as a means of achieving a mutually satisfactory resolution to a current problem, but also because of its positive impact on future relations between parents and school personnel. As a result of the structured discussion with school representatives that takes place at mediation, parents were reported to obtain new insights and better understanding of the developmental implications of their child's disability, as well as the context and constraints within which the school operates.

Further, mediation provides parents the opportunity to gain new knowledge and to practice skills which prove useful to them in subsequent contacts and meetings with the school regarding their child's program. Parents who use mediation were reported to feel more confident than before in their ability to represent their child's interests in the future, to feel less intimidated by school procedure, and able to communicate more effectively with educational professionals regarding their child's needs and services. It appears that the increased trust, goodwill, and respect that often develops between parents and school personnel who have participated together in mediation are vital to their ongoing relationship in the education of the handicapped child.

The studies of SEA-administered mediation programs provide preliminary evidence to suggest that mediation is a workable and satisfactory process for a significant portion of the parents and schools who are not able to reconcile their differences within the educational planning process. These studies indicate that mediation is often the procedure of choice for resolving disputes, that it decreases substantially the cost of achieving agreement, and that, in many cases, it improves the ability of parents and schools to work effectively together in the future.

The success of this less formal, adversarial and costly procedure has reinforced the belief of many special education administrators and parents that good dispute settlement procedures should not be reserved for the time when parties' differences escalate to the point that formal intervention by an impartial hearing officer is necessary. The SEA representatives and parent advocates in the NASDSE study noted that a history of misunderstandings and ineffective communications between parents and schools, rather than substantive differences, are at the heart of far too many disputes that go to mediation or hearing. This recognition highlights not only the important role that knowledge and skills can play in facilitating parents' ability to work effectively within the school-based educational planning process, but also the continuing need to assist school personnel and parents acquire more productive communication and problem-solving skills.

Assisting States and Localities in Educating All Handicapped Children

A major goal of the EHA-B State Grant Program is to assist States and local educational agencies in providing a free appropriate public education for all handicapped children. This assistance is provided through two primary funding systems: (1) entitlement programs such as the EHA-B State Grant Program, State Operated Programs for the Handicapped, and the Incentive Grant Program, and (2) discretionary grant programs authorized under the Act.

This chapter describes the three entitlement programs and provides examples of innovative ways in which the States and local educational agencies are using these funds to improve and expand services to handicapped children. In addition, a number of examples of activities supported by the discretionary programs are described in which projects receive Federal support to encourage and improve the coordination and cooperation between multiple potential direct service providers. These projects illustrate the nature of national effort being made to address the complex service delivery needs characterizing early childhood, secondary-transition, and non-pullout special education service delivery. Finally, Federal, State, and local expenditures for special education by the States are specified with particular emphasis on the variation among States in expenditures for the 1982-83 school year.

Funds for Serving All Handicapped Children

Each annual report to Congress on the Education of the Handicapped Act is required to provide information on Federal, State, and local expenditures. This section of the report describes and provides numerous examples of the ways in which funds generated by the EHA-B State Grant Program, ECIA (SOP), and Section 619 Incentive Grants are used by the States in order to increase and improve services to handicapped children and youth.

Entitlement Programs

EHA-B State Grant Program

The EHA-B State Grant Program distributes funds on an annual basis to each State based on the total number of handicapped children reported by their respective local educational agencies as receiving special education and related services on December 1 of the previous fiscal year. The funding for the EHA-B State Grant Program has increased from $251,700,000 in FY 77 to $1,163,282,000 in FY 86. Accordingly, the average per child amount has increased from $72 per child in FY 77 to $282 for FY 86. This per child average is not a per capita expenditure, but represents the distribution formula on which the allocation to each State is based (see Table 27).

Each SEA must distribute at least 75 percent of the funds received under the EHA-B State Grant Program to LEAs and intermediate units (IEUs) as a flow-through to assist in the education of handicapped students (20 U.S.C. 1411(c)(1)(B)). The LEAs must assure that these flow-through funds are expended for direct services to handicapped children and that the Federal funds do not supplant State and local expenditures. SEAs may set aside the remaining 25 percent of EHA-B State Grant Program funds for State use. Of this, States may use up to one-fifth, or $350,000, whichever is greater, for administrative costs. Many States have used the remaining SEA set-aside to develop programs of direct and support services addressing special priorities; others have used the funds to increase the amounts available to LEAs.

During 1986, many SEAs used these funds to support activities in two areas: (1) the integration of special and regular education; and (2) the transition of secondary-aged handicapped students from school to the world of work. Examples of each are described below.

1. Integration of Special and Regular Education. SEAs are increasingly using their Part B set-aside funds for the general purpose of reducing administrative and organizational barriers between special and regular education. These efforts seek to use regular teachers and special education in a cooperative and collaborative effort to eliminate the need of educating non-handicapped and handicapped students in different educational settings. They are illustrative of options for improving the integration of two service delivery systems. Following are some examples:

   - As part of its continuing effort to mainstream handicapped students into the regular classroom setting, the Missouri Department of Education awarded its Parkhill School District a portion of the SEAs Part B set-aside funds to operate the Parkhill Curriculum Development Project for junior and senior high school students. Special education services are provided to junior and senior high school students through an interdisciplinary team approach comprised of both learning disabilities and regular education teachers. Specifically, the project has three components: (1) the "class within a class" team teaching model, in which a small group of handicapped students receives instruction within a larger class of regular education students under the guidance of both a learning disabilities teacher who teaches study skills and learning strategies, and a regular

TABLE 27

EHA-B State Grant Program Funding, Fiscal Years 1977-1986

Fiscal Year	EHA-B State Grants	Child Count	Per-Child Average
1977	$ 251,769,927	3,485,000	$ 72
1978	566,030,074	3,561,000	159
1979	804,000,000	3,700,000	217
1980	874,500,000	3,803,000	230
1981	874,500,000	3,941,000	222
1982	931,008,000	3,990,000	233
1983	1,017,900,000	4,053,000	251
1984	1,068,875,000	4,094,000	261
1985	1,135,145,000	4,113,312	276
1986	1,163,282,000	4,121,104	282

education teacher who teaches content area curriculum; (2) curriculum writing in content areas for all students by both the learning disabilities and regular education teachers; and (3) development of a "learning strategies" curriculum which outlines the study skills necessary for students to master content courses. Evaluation data have shown positive results for this subgroup of students with learning disabilities who participated in the regular classes: 95 percent were attentive to the teacher and participated in classroom activities; 90 percent achieved appropriate note-taking skills; and 80 percent completed assignments on time. Moreover, as a result of the interdisciplinary team intervention, 85 percent of these students were able to achieve grades in the classroom within the normal range. State officials emphasize that this academic achievement has been realized in a least restrictive environment, where a collaborative working relationship between regular and special education teachers fosters the development of curricula and instruction that is effective for average, slow, and mildly handicapped learners.

- A priority area for the State of Kentucky has been and continues to be educating the handicapped along with the nonhandicapped in the least restrictive environment. The Kentucky Department of Education allocated a portion of the Part B set-aside to a Statewide Training and Learning Strategies Program, adapted from a research-based curriculum developed by Kansas University Institute for Research and Learning Disabilities. The training program equips special education teachers with the appropriate knowledge and skills to teach mildly handicapped students, grades 6 through 12, how to succeed in the least restrictive environment. The goal of learning strategies is to provide students with strategies that will assist them to learn and to use what they have learned. As a result, students will be better equipped for their content courses, thus fostering more independent behavior among students in a variety of settings--the resource room, the regular classroom and the postsecondary environment.

The inservice training program provides four days of training on how to implement several strategies within the Learning Strategies Curriculum. The inservice training is organized into three types of strategies that correspond to the principal demands of the secondary curriculum: (1) strategies that help students acquire information from written materials; (2) strategies that enable students to identify and store important information, and (3) strategies for facilitating written expression. Two days of follow-up are built into the curriculum training, whereby teachers share implementation experiences and are taught additional strategies.

Last year five regional training sessions were held in a central location in the State; this year trainers are going into local school districts where teachers volunteer to participate. Already there have been 16 requests for training. In order to respond to the demand for this inservice, a training of trainers model is being implemented. Fifteen individuals from local districts and from higher education will be instructed to disseminate the training program during the 1986-87 school year. In addition, districts are setting up learning strategies courses for summer schools, and teachers are organizing coaching teams after school. The impact of this SEA initiative to educate students with handicaps in the regular classroom is being greatly expanded through the numerous requests for teacher training in the implementation strategies of the project. As a result, an additional 2,000 children will be served in the first year.

- The Delaware Department of Education awarded the Christina School District a portion of its set-aside funds to integrate identified handicapped students with non-handicapped students in a manner devoid of labeling. This K-12 program, called Team Approach to Mastery (TAM), allows a regular and a special education teacher to work together the entire day in a classroom. The program has operated successfully for over 10 years, and permits joint planning and decision making by teachers and full involvement with the class. One third of the students have been identified as eligible for special education and the two-thirds of regular students are assigned to the class randomly or at the request of their parents.

State officials feel that the program's most important feature is that it allows handicapped children to be educated appropriately in the regular classroom 100 percent of the time, thereby avoiding the potential stigma arising from delivery of special education in pullout settings such as resource or self-contained classrooms. TAM also broadens the perspectives of regular education students, who develop a sensitivity to classmates with special needs. Finally, test data of TAM participants attest to the program's success. Special education students in grades K-6 enrolled in TAM experienced significant gains in reading, spelling, and math. Regular education students in grades K-6 enrolled in TAM achieved consistently higher scores in Statewide testing programs than regular education students not enrolled in TAM. Longitudinal data of TAM students has produced similar findings. The programming has been so successful at the K-6 level, that is is now being implemented also in Secondary programs. The SEA is encouraging replication throughout the State.

- North Carolina is concerned that handicapped children be educated in the least restrictive environment. The North Carolina Division for Exceptional Children uses some of its Part B administrative funds, along with State and local money, to operate eight regional centers. These centers assist LEAs in the establishment of multidisciplinary teams which provide support for regular education teachers who work with special needs of children at either the elementary or secondary school level. Specifically, a regional coordinator at each center, assisted by a field service consultant, works with a school-based staff support team at each school. The school team is composed of several regular education teachers, one or two special education teachers, a school psychologist and the school principal. Although the exact role of the teams vary at each school, their principal means of support is consultation and follow-up assistance to staff who request help with a particular student. Once a teacher recognizes a problem and finds that she/he cannot solve it, the teacher contacts an assisting teacher team member.

The teacher and the team member work together to solve the problem. They both gather information to present to the entire team at a meeting. The team then helps identify alternative plans to solve the problem. Over 500 teachers have been trained to use this consulting teacher model in North Carolina's eight geographical regions.

State officials believe the regional centers and school-based support teams have had a measurable effect on special education in the State. For example, in Wake County, the original site for North Carolina's development of support teams, the number of referrals for team assistance has increased by 60 percent over seven years. Approximately ten LEAs have developed teams, using Wake County personnel as key trainers. Teachers are now making better use of diagnostic and curricular information. As a result, the data on children referred for evaluation for eligibility in special education shows much promise in the avoidance of erroneous classification. There has been an increase in the number of appropriate referrals from kindergarten to grade 2, rather than referrals from grades 3 to 5. This results also in earlier intervention and more successful outcomes.

- The Texas Education Agency's commitment to integration of regular and special education is exemplified by a new Statewide video technology project funded by Part B administrative money. The project's overriding goal is to increase the likelihood that handicapped children will be served in the least restrictive environment by stimulating the thinking of school faculty and administrators who are devising alternative approaches to educating the handicapped child in the regular classroom. A 30-minute videotape is being prepared which describes exemplary practices and programs in Texas that have enabled handicapped children to remain in the regular classroom. The audio portion of the tape will feature interviews with program administrators, teachers, parents, and, when appropriate, students. The film will be distributed to the State's 20 regional service centers which provide support and technical assistance to school districts at the local level. If a district is especially interested in a program described in the film, the center will link the school district with the program sponsor, so that further exchange can occur. State officials are also preparing a manual to accompany the videotape, which will provide details on program administration and operation. Both the tape and the manual should be ready by spring 1987.

2. Transition from School to Work. Several SEAs have used their Part B set aside funds to develop transition services for secondary-aged handicapped students. These States have been concerned that many handicapped students exit the school system without the skills and preparation needed for independent living and a job. Examples of ways in which States have attempted to improve the preparation of secondary-aged students using their Part B set aside funds include the following:

   - As part of its continuing effort to improve the transition from school to work for handicapped students, the Kansas State Department of Education since 1985 has used a portion of its Part B set-aside in combination with State categorical aid to fund a supported work-study training model for all special education students aged 16-21 in southeast Kansas. The goal of Project STEP (Secondary Transition Education Program) is to find appropriate vocational training for handicapped students in competitive employment settings. Project staff and a work-study coordinator from the public school contact local businesses and enter into agreements as to where to place students and which educational program best suits their needs at a particular site. For example, on-site job training settings included an industrial plant manufacturing electrical assemblies for tractor-trailers, a manufacturer of coal preparation and bulk handling systems where students were taught to microfiche blueprints.

     In addition to site-specific IEPs, students received skill training in the areas of socialization, adjustment, and self-sufficiency skill. Thus far, the project has reached students in nine counties. Outcomes include better training, better post-school placement records, and establishment of school, business and community collabotation.

- Since 1979, the Colorado State Department of Education has had an interest in developing career and vocational plans for its school-age population in order to ease the student's transition from school to work and to prepare the adolescent for adulthood. State officials realized that career planning and training needed improvement at the secondary level, and a core curriculum was crucial to that effort. The State decided to provide Part B set aside money to develop a curriculum for junior and senior high school students that goes beyond academic subjects to include training in career preparation, job skill development, life management, and communication skills in both the classroom and the community. In addition, the SEA has funded local districts to develop K-12 career and vocational plans as well as to use the new curriculum. LEAs explore job opportunities and independent living programs in the community and apply this knowledge to the development of the job preparedness and life management parts of the curriculum. An advisory committee, composed of parents, students and community representatives, have input in the process. The project is a cooperative effort; staff from rehabilitation, vocational education, and developmental disabilities agencies are involved. In fact, the State is now working on an interagency agreement: the Department of Labor; the Department of Education, Division of Developmental Disabilities and Division of Rehabilitation; and the State Board for Community Colleges and Occupational Education are in the process of defining their respective roles and responsibilities at the point of transition. In addition, representatives of the Division of Youth Services and the Department of Mental Health are giving input into the process.

  There are tangible, positive results that speak for the program's success. Young persons with handicaps are recognized as employable and are now out in the community working both while they are students and after they complete school whereas before this program they were not. The State now feels that it has a replicable, tested curricula for use in school districts throughout Colorado.

- As part of its strong commitment to the transition of handicapped students from school to work, the Wisconsin Department of Public Instruction awarded some of its Part B set aside funds to the Madison Metropolitan School District for the operation of a transition from institution to school program for the moderately and severely handicapped. The program is also supported by some ECIA (SOP) money for the severely handicapped, and considerable State and local contributions. The program enables handicapped adolescents to engage in meaningful work and work-related activities by teaching them to: (1) learn in the "on the job environment"; (2) develop adequate and appropriate communication skills; and (3) function in an integrated community environment.

  Wisconsin's program is based on several premises. First, that a majority of severely handicapped students can be prepared to perform meaningful work in nonsheltered environments. Second, that nonsheltered environments are inherently less restrictive, more conducive to the performance of meaningful work, more educationally defensible, and less costly than sheltered environments. Third, that integrated employment is the natural extension of integrated education. Under the program, community-based instruction is provided at over 120 work sites. A vocational transition teacher works with students, parents, classroom and vocational teachers and postsecondary service providers in the development of vocational transition plans prior to graduation. Receiving agencies from the local Mental Health and Developmental Disabilities Board assume responsibility for students during their last year in school. The school system provides teaching and support services, such as psychology, social work, speech and language development, physical and occupational therapy, counseling, nursing, audiology, and transportation to and from work sites.

  The State is implementing the concept of "least restrictive environment" in its broadest sense. Students are taught in a competitive work setting and are able to secure jobs on a competitive basis. In fact, 100 percent of the moderately and severely handicapped graduates (of 1984-1985 and 1985-1986) of this program are now employed--all in non-sheltered work.

- The Missouri Department of Education has allocated a portion of its Part B set aside money to the Columbia Public School District to support a Transition from School to Work Program for secondary school students. In a cooperative effort with Missouri LINK, a State-funded project that provides inservice training to vocational teachers on behalf of special education students, Columbia offers a vocational program with built-in assistance for handicapped students. Now in its third year, the Transition from School to Work project aims to: (1) develop activities to make educators, employers, and parents more aware of transition opportunities in the community; and (2) develop a hands-on resource manual for schools to assist them in addressing the transition from school to work.

Although the program primarily serves secondary students, basic career information is provided to those in elementary schools as well. Once a student reaches the seventh grade, the school system advises him/her to consider one of three options: (1) a community-based program; (2) an academic/career vocational program, for most regular education and mildly handicapped students; and (3) a functional academic/vocational curriculum for those with handicapping conditions. Regardless of the option chosen, the program offers students four types of experiences: (1) academic training for a portion or all of the day; (2) job training at various community sites in either paid or volunteer work; (3) leisure training in how to spend one's free time; and (4) an apartment living program to teach independent living skills. Assistance in the job training component is provided by vocational rehabilitation counselors at the public school and a private agency that trains handicapped graduates for work.

Columbia Public School officials identified several aspects of the program that are unique in the State: First, a staff person is assigned to assist in job placement for all handicapped students in the district. During the summer this person assists the

> adolescents in applying to institutions of postsecondary education, entering the military service, or joining a group home. Second, this program has developed a workable partnership between special educators and vocational educators in the school system. Third, the program has raised the consciousness of school administrators toward planning for success for students of all abilities.
>
> Educators in Missouri present concerns for management of the secondary and transitional needs of their students with handicaps. The widespread recognition of success in this program makes replication likely in other school districts in the State.

State Operated Programs for the Handicapped

Funds are also provided to assist in educating handicapped children in State-operated or State-supported schools, and to LEAs serving handicapped children who have transferred from State-operated programs under Chapter 1 of ECIA. This program is sometimes referred to as the P.L. 89-313 program, a reference to the 1965 amendment to Title I of the Elementary and Secondary Education Act which was the initial authorizing statute. ECIA (SOP) funds are provided for the purpose of expanding or improving programs serving handicapped children currently or previously enrolled in State-operated or State-supported programs. In order to encourage the transfer of children to programs in their home communities, a 1975 amendment to ECIA (SOP) allowed program funds to follow children transferred from State-operated or State-supported programs to programs supported and operated by LEAs. The number of children served by LEAs increased substantially from 25,000 in FY 79, the first year these statistics were available, to 49,681 in FY 83, the last year these statistics were collected. Table 28 presents the funding history of ECIA (SOP) from FY 66 to FY 86, including the amount distributed, the number of children served, and the per pupil allocation.

While most funds under this program are used for support of direct services, the following examples are illustrative of ways in which some SEAs use part of the ECIA (SOP) funds to support innovative service delivery and parent involvement for improving the education of handicapped children eligible to benefit from this assistance program.

- In Arizona, four of the five State-operated programs are administered by the Arizona Department of Economic Security (DES) and serve over 300 handicapped children across the State. While the majority of children served are preschool aged, during FY 85 two of the DES districts served school-aged children who are severely handicapped and cannot attend a public school for medical reasons. Several of the programs run by DES and funded with ECIA monies in FY 85 were focused on providing support services for parents. Two rural counties provided outreach services and referrals, as well as parent training and counseling. Family support services are geared toward promoting the carryover of programs in the homes, to enhance services provided by therapists and teachers. In addition, an inservice program for parents and professional staff is provided using ECIA (SOP) funds. This past year, a major topic was on "Death and Dying of Children", because so many of the participating children are medically at risk.

- The Arkansas Department of Special Education funded a joint effort using ECIA (SOP) funds and State funds for Developmental Disabilities Services to provide supplemental resource and media services to forty-nine community programs and four Human Development Centers for the mentally retarded. The project was able to provide a variety of audiovisual aids and audio equipment as well as inservice training in the use of the equipment. By funding the project jointly with DDS, a broader range of equipment was available for the Statewide project.

- Connecticut has also used some of its ECIA dollars to fund various projects focused on parents and the home/school link. Using ECIA (SOP) funds, 28 parents of blind and visually handicapped students were sent to a New England regional workshop which addressed the influences of new advances in technology upon the educational opportunities open to blind and visually impaired students. Home contacts were conducted by home/family services with the parents of 48 retarded students to coordinate programming efforts between home and school. An in-school parent support group was also established to increase contacts between parents and schools. The group met weekly with staff, observed their students in programs, and served as resources to new parents.

TABLE 28

ECIA (SOP) State Formula Grant Funding From Fiscal Years 1966-1986

Fiscal Year	Amount Distributed	Number of Children	Per Pupil Allocation
1966	$ 15,917,101	65,440	$ 243
1967	15,078,410	82,797	182
1968	24,746,993	87,389	283
1969	29,781,258	96,499	309
1970	37,483,838	110,531	339
1971	46,130,772	121,568	379
1972	56,380,937	131,831	428
1973	75,962,098	157,997	481
1974	85,777,779	166,415	515
1975[a]	183,732,163	178,763	1,028
1976	111,433,451	188,078	592
1977	121,590,937	201,429	604
1978	132,492,071	223,804	592
1979	143,353,492	225,660	635
1980	145,000,000	233,744	620
1981	152,625,000	243,708	626
1982	146,520,000	242,616	604
1983	146,520,000	245,785	596
1984	146,520,000	247,119	593
1985	150,170,000	249,656	587
1986	143,713,000	251,116	572

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[a] From fiscal years 1966-74, the funds appropriated were for use in that fiscal year. However, beginning in FY 75, funds were to be used in the succeeding fiscal year. As a result, the appropriation in FY 75 was for funds to be used in both fiscal years 1975 and 1976.

- Some of the ECIA (SOP) funds available in Florida were used to expand educational programs for young adults in three State hospitals and eighteen State-supported programs. The types of improved services included enhancement of vocational programs in horticulture and computer assisted instruction, and expansion of a TV studio which sent out educational programs to all students residing in a particular treatment center. As many of the students were restricted to their living units for most of the day, the programs were designed for broadcasting programmed instruction to them.

- In Louisiana, a portion of the State's ECIA (SOP) was used for development of a computerized tracking system in 15 school sites operated by one of the Special School Districts. The information system includes such data as demographics of the student population, due process, tests, IEPs, instructional services, and related services.

- Maryland used ECIA (SOP) monies to conduct a longitudinal study to determine if residential students placed in nonpublic schools were being appropriately placed in the least restrictive environment. Another objective of the project is to assist local and State agencies in planning for the eventual return of institutionalized children to the home community. In FY 1985, the sixth year of the study, data collection was limited to those students who had received tuition assistance from the Maryland State Department of Education during FY 84 but were not included on the list of students with approved placements in FY 85. For the 148 students involved, the findings indicated that:

  (1) 36 percent returned to the public school or graduated.

  (2) 7 percent transferred to State institutions or hospitals

  (3) 17 percent were in another special education placement.

  (4) 40 percent withdrew from the system, died or moved out-of-State.

- One of the ECIA (SOP) projects funded in Michigan involved the development of a comprehensive physical education program for the mentally impaired. The initial intent of the project was to assist mentally handicapped students in a day school in the development of recreational skills that were applicable to the home and community. Secondary goals included student acquisition of health education skills, such as proper daily exercise needs, dietary habits, and weight control procedures. Students were instructed primarily in individual sports including bowling, roller skating, cross-country skiing, jogging, and walking. Secondary emphasis was placed on team sports such as basketball, volleyball, and soccer. Extracurricular involvement for students participating in team sports was provided by the Michigan Special Olympics program. Team sports competition also involved the integration of local area school teams composed of regular education nonhandicapped students, who visited the day school for competitive events.

The project resulted in the mentally handicapped students acquiring the skills necessary to be active participants in group or individual recreational pursuits and most of the students reported that they had adopted a personal recreational sport which they now enjoy after school or on weekends. In addition, perhaps the most important accomplishment of the program was in the integration of regular education students into the physical education program. Interschool competition with regular education students provided a two-way learning experience for handicapped and nonhandicapped participants.

Incentive Grant Program

Section 619 of EHA-B authorizes the preschool Incentive Grant Program to States. The Incentive Grant Program is designed to encourage States to increase educational services to preschool handicapped children aged three through five. The distribution of movies to the States is based on the number of handicapped children in this age range receiving special education and related services. The Education of the Handicapped Act Amendments of 1983 expanded the age range eligible to be served to birth through five years; however, the Amendments did not alter the three through five age range used to determine the distribution of funds.

Table 29 provides a summary of the funding history and the number of children served by the Incentive Grant Program. In FY 77, less than one-half of the SEAs elected to participate in the program. Since FY 78, an increasing number of States have chosen to participate and in FY 86, 56 of the eligible agencies are participating in the program. This increase in State participation has been accompanied by a 30 percent increase in the number of preschool children receiving special education and related services.

TABLE 29

Incentive Grant Program Funding
From Fiscal Year 1977 to 1986

Fiscal Year	Funding	Child Count	Per Child Share
1977	$12,500,000	197,000	$ 63
1978	15,000,000	201,000	75
1979	17,500,000	215,000	81
1980	25,000,000	232,000	108
1981	25,000,000	237,000	105
1982	24,000,000	228,000	105
1983	25,000,000	242,000	103
1984	26,330,000	253,000	104
1985	29,000,000	259,000	112
1986	28,710,000	261,008	110

Most States use their Incentive Grant funds under Section 619 to fund new or innovative preschool programs at the local level. Examples of early intervention programs designed to prevent or reduce placement of children in special education in later years include the following:

- Kentucky's Department of Education awards some of its Incentive Grant money through a competitive RFP process to local districts that apply to become sites for KIK--Kentucky's Individualized Kindergarten. Serving five year olds in 28 sites throughout the State, KIK was designed to mainstream special education students into the regular kindergarten classroom. After screening all children to determine who is at risk, the program uses behavior modification, parent involvement, and a specially-developed curriculum to enable handicapped children to move into the regular kindergarten. Children enrolled in KIK between 1981 and 1985 showed statistically significant improvement in the areas of fine and gross motor skills, cognition, and language when tested after completion of the program. As of January 1986, roughly 40 percent of KIK children (enrolled 1981-1985) were placed in regular classrooms without assistance, while an additional 26 percent were placed in regular classrooms with resource room assistance.

- Since 1976, the Rhode Island Department of Education has pursued the goal of identifying and serving all preschool handicapped children. Currently, three percent of its three through five year olds are identified as handicapped and provided mandated services. The State's objective in the next three years is to field test a system that identifies and services a greater number of handicapped preschoolers, enabling the State to eventually reach at least five percent of the total preschool aged population. In the process, the State is striving to serve its handicapped preschoolers in as normal an environment as possible utilizing both regulatory policy and Incentive Grant funds.

  During FYs 1984-86, the SEA awarded nine 3-year grants to LEAs for such activities as intensified screening efforts, aggressive outreach and programming for limited-English proficient preschoolers, the development of more normalized environments, and parent education. In 1986, the State awarded its Preschool Incentive Grant funds to nine new projects aimed at mainstreaming handicapped preschoolers and/or training their parents.

  The integration projects were quite varied. In some, handicapped students were integrated into nonhandicapped settings such as nursery schools, Head Start programs, community summer recreation programs, and a private preschool program. Mainstreaming also occurred when nonhandicapped children were brought into public schools to form preschool classes into which their handicapped peers from self-contained classes are integrated. In another case, nursery school students were invited to join a self-contained preschool class of handicapped children to form integrated playgroups.

  During FYs 1984-86, a total of approximately 500 children and/or families were directly served as a result of Incentive Grant funds used in 15 school districts across the State.

  State officials report that this preschool incentive funding has encouraged the local districts to include preschool programming where it had not existed before and has created a communications network among preschool project directors in the various communities. They believe that this special education services for very young handicapped children will continue to spread Statewide.

- The Alabama State Department of Education used part of its Incentive Grant money to fund the Barbour County Preschool Program, a special program for at-risk three and four year

> olds. Barbour County is a rural county where 82 percent of the population is minority and 97 percent have low-incomes. Many of the children's parents are young single parents, and unemployed. Because as many as one-third of the county's 2,500 children eventually end up in special education programs, local administrators recognized the need for early intervention to prevent later referrals to special education. They developed, with local funds to match the Incentive Grant funds, a new program in which a trained paraprofessional meets with preschoolers and their parents for one-half day each week at a public school. The paraprofessional demonstrates to the parent(s) how to work with his/her child to stimulate learning. From this program evolved a preschool program for four-year olds who now attend school daily. Along with a certified kindergarten teacher, the paraprofessional instructs the children in language development, music activities, listening skills, socialization, and the development of motor skills. School officials believe this early intervention project will prevent the need for special education in later school years.

The foregoing description of State use of Federal funds is illustrative of the use toward which States direct their EHA-B, ECIA (SOP), and Section 619 Incentive Grant funds. These Federal assistance programs are being utilized to both increase the availability of services to handicapped children and to improve the quality of those services. EHA-B set aside and administrative funds are providing for innovative methods of integrating special education and regular education services and students as well as improving the transition of students from school to the world of work. ECIA (SOP) funds are being utilized to continue to integrate severely handicapped students, particularly preschool children, into local education agency programs in order to decrease the probability of future placement in State facilities. Finally, Incentive Grant funds are being used to develop innovative service programs designed to prevent or reduce placement of children in special education programs when they reach school age.

EHA Discretionary Programs

The discretionary programs established under EHA are another source of Federal funds available to SEAs, LEAs, and other agencies. In total, the discretionary programs provided $158.1 million in FY 86, through awards under 11 discretionary grant and contract programs. Appendix C provides a summary of the number and amount of discretionary funding awarded in FY 86 by State.

The discretionary programs authorized under Parts B, C, D, E, and F of the Act are:

- Handicapped Regional Resource Centers
- Handicapped Innovative Programs - Deaf-Blind Centers
- Early Childhood Education Programs for Handicapped Children
- Innovative Programs for Severely Handicapped Children
- Postsecondary Education Programs for Handicapped Persons
- Training Personnel for the Education of the Handicapped
- Handicapped Teacher Recruitment and Information
- Innovation and Development Programs
- Media Services and Captioned Films
- Special Studies
- Secondary Education and Transitional Services for Handicapped Youth.

Evaluation of EHA Discretionary Programs

During 1986, evaluation activities relating to EHA discretionary programs were carried out under the authority contained in Section 618 and 627 of the Act. In September 1985 a contract was awarded to COSMOS Corporation, Washington, D.C., to undertake a series of studies focusing on five programs over a 33-month period. These programs are the Handicapped Children's Early Education Program, Special Education Personnel Development, Media Services and Captioned Films/Technology Program, and the Secondary and Transitional Services Program.

For each program, a two-phased process is being carried out, with each phase lasting approximately 6 months. The first phase consists of an analysis of the goals of the program, identification of the strategies used by the Office of Special Education Programs to implement the legislation, a description of the program logic underlying those strategies, and finally, an evaluation of whether the adopted strategies are likely to lead to improved special education programs and services.

The second phase targets one of the strategies identified during the Phase 1 Goal Evaluation, and attempts to gather more specific information which would help program managers improve the design and administration of programs within the Office of Special Education Programs.

During the first year of the contract, from October 1, 1985 through September 30, 1986, the Goal Evaluation phase (Phase 1) was completed for the Early Childhood, and Media Services and Captioned Films/Technology Programs, and was approximately half-completed for the Special Education Personnel Development Program. The results of the studies which were completed are described below. It should be noted that these evaluation studies are not intended to be impact evaluations to enable the formulation of conclusions about the program's overall effectiveness. Rather, they are intended to provide information on the degree to which program strategies and activities logically follow, and are likely to achieve, the intent of the legislation, thereby assisting OSEP managers in identifying ways to improve program design, administration, and monitoring.

Handicapped Children's Early Education Program (HCEEP)

The starting point for each goal evaluation is the statement of the major goals of the program. For HCEEP, the goals are: to design experimental approaches to meet the special needs of young children with handicaps; to develop programs which facilitate the intellectual, mental, social, physical, and language development of the children; to acquaint the community with the problems and potential of young handicapped children, to improve coordination of services at the State and local level; and to encourage parental participation in the development of services.

The methodology used for the goal evaluation employed multiple data sources and drew heavily on the assistance of OSEP staff and management. Sources of information included: detailed reviews of project files; structured interviews with Congressional staff, OSEP managers, grantees, and professionals in the field; existing literature and program planning documents; and site visits to HCEEP projects. Each of the major components of the program were examined: demonstrations, outreach projects, State plan grants, technical assistance, and research institutes.

In general, the goals reported by Federal and project staff were found to be congruent, although there was some discrepancy between the Federal office and the technical assistance providers for the program regarding the most desirable technical assistance approach to be taken for State plan grants. Implementation of the program appeared to be occurring in a manner consistent with Federal expectations. Documented support was evident in the projects for many of the causal assumptions determined to underlie the program logic. Several kinds of data were available to document the program's success in fostering increased services for young handicapped children.

In addition to the assessment of the plausibility of the program achieving its goals, the evaluation report included several recommendations which were particularly relevant to the Federal administration of the program:

- Difficulties experienced by outreach projects in retaining staff and making training arrangements might be addressed by establishing a two- or three-year funding cycle as opposed to the current one-year period.

- Greater coordination is needed at the Federal level between the various State planning efforts funded under EHA as well as other Federal agency planning efforts.

- Greater contact is needed between OSEP project officers and project directors and staff in the field. Differences in perception of program goals and appropriate roles can result from lack of sufficient interaction between OSEP staff and grantees.

- Procedures need to be developed in OSEP to maintain information and track performance of projects. There is a dearth of information on the quality and richness of the program's activities which is evident primarily at the project level.

These results were included in the final Goal Evaluation report submitted by COSMOS Corporation on June 27, 1986. The second phase of the study--the Strategy Evaluation--is focusing on the Outreach strategy and will be completed in February 1987.

Media Services/Technology Program

The Goal Evaluation of the technology program, authorized as part of the Part F Media Services and Captioned Films program, was carried out between February and September 1986. The goal of the program is to increase the use of high quality and relevant instructional media, materials, and technologies, to meet the educational needs of handicapped children effectively. In addition to a series of structured interviews similar to those used in the Early Childhood evaluation, case reviews were done on 14 of the 45 projects funded in the program over a recent 3-year period.

The most important conclusion of the report was that the program logic model is valid, and that funded activities were linked to a variety of intermediate and ultimate outcomes specified by Federal managers. Intermediate outcomes fell under all three categories of enhanced availability, improved quality, and encouraged use of technology. As for the ultimate outcomes, the case reviews indicated that several types also were possible:

- Those directly involving educational outcomes--e.g., improved learning or educational performance;
- Those relevant to educational outcomes but only in an "enabling" way--e.g., to improve accessibility to programs; and
- Those related in only an indirect way to educational outcomes--e.g., changes in teaching practice due to increased availability of technology information.

The evaluation found that the extent of actual attainment of these outcomes was not well documented. Despite the fact that most of the intermediate and ultimate outcomes of the various projects were conceptually plausible, few projects had collected evidence regarding the actual attainment of outcomes. A recommendation was made for the program to make greater use of outcome evaluations designed to collect evidence about intermediate and ultimate outcomes. In addition, a recommendation was made that the program incorporate requirements for better quality control procedures in funded projects to assure that products and information on technology being disseminated by the projects meet acceptable standards. This could be done either by use of peer review panels to review products, undertaking needs assessment activities to increase the likelihood that products are responsive to the needs of the target audience, or requiring specific testing standards for devices which are developed by funded projects. The strategy evaluation phase for the technology program is scheduled to begin in mid-1987.

The remainder of this section illustrates how the discretionary programs in FY 86 contributed to supporting three OSERS priorities: early childhood education, the transition of handicapped youth from school to work and adult life, and relationships between general and special education. A common factor among these priorities is that each represents multiple, complex service delivery requirements. In the cases of early childhood education and transitional service delivery, these requirements go beyond the bounds of education or educationally-related services to involve the coordination of medical, educational, and human service providers. Availability, access, and coordination of these services are essential to serving and maintaining children in the least restrictive environment. Expanded program options and techniques to assist students who are having difficulties in regular class programs also support the least restrictive environment principle, and may help to keep students in regular class programs rather than being referred for special education.

Early Childhood Education

This section reviews the multi-faceted Federal initiatives in early intervention and education for young children with handicaps or who are at risk of becoming handicapped. A detailed State by State presentation of relevant activities and statistics is contained in Appendix D.

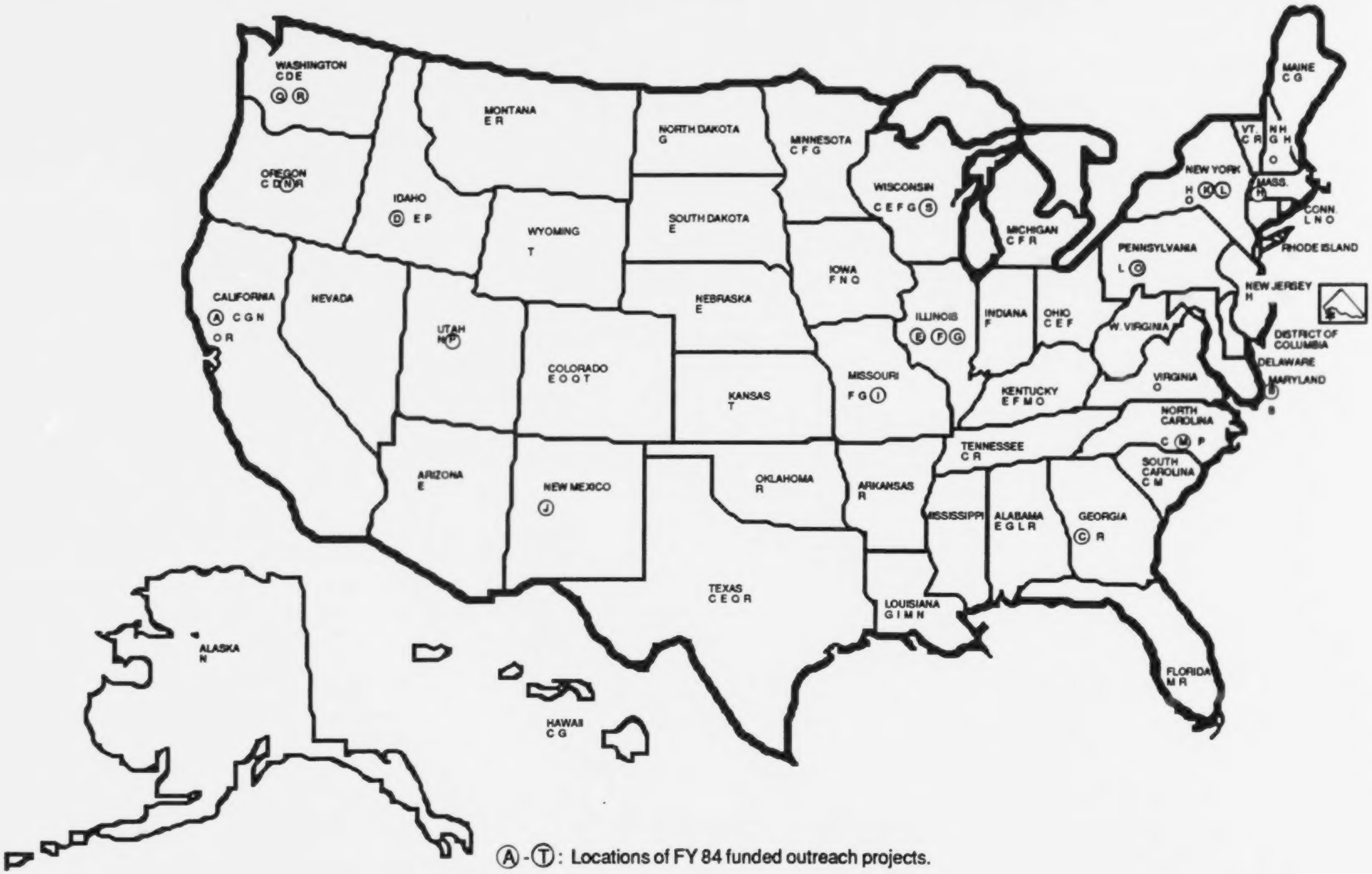
Service delivery to handicapped infants and children requires multidisciplinary, multiagency involvement in a complex process involving identification, referral, screening, evaluation, diagnosis, tracking, and intervention. This process and the benefits derived from service delivery to infants and young children have been discussed in previous reports to Congress. There is evidence that under certain conditions, early intervention programs accelerate handicapped children's development and reduce the effects of handicapping conditions (e.g., Casto and Mastropieri, 1986; White and Greenspan, 1986). In addition, studies have found that students require a reduced level of service in later years when they receive preschool services (Weiss, 1981).

In recognition of this evidence, an increasing number of public, private, and voluntary organizations are involved in expanding the availability of early childhood services; the knowledge base regarding child identification, service delivery processes, and intervention techniques; and the provision of services to handicapped children in preschools along with their nonhandicapped peers. This increased availability and accessibility of programs for handicapped infants and young children also serves to promote the principle of least restrictive environment. Some States now mandate the delivery of services for handicapped infants, and others are lowering the age at which handicapped infants must be or may be served.

The Handicapped Children's Early Education Program acts as a catalyst to this service initiation and improvement through its demonstration, outreach, and technical assistance projects; research institutes; and early education State grants. According to the recent evaluation by COSMOS Corporation, significant numbers of replications continue to be generated by demonstration and outreach projects. These projects have a wide geographical distribution and provide outreach services to an array of States throughout the country, (see Figure 3). The settings for service delivery demonstration and outreach projects included SEAs, LEAs, centers, hospitals, and the home, often in some combination. Most of the demonstration projects were involved in interagency activities, including such organizations as health care organizations, hospitals, State agencies such as departments of child services, and universities, as well as SEAs. Accomplishments cited by the COSMOS sample of demonstration projects included obtaining support from the State for future continuation of the project once the HCEEP funding ends, and making ties with the medical community. (A previous study by Roy Littlejohn Associates [1982] had reported that 82 percent of demonstration projects were continued using State and local funds after the 3-year Federally funded demonstration period.) However, one of the barriers cited by the COSMOS study was that a mandate to serve handicapped infants is still lacking in most States.

The research institutes support service improvement by increasing the early education knowledge base, producing data on the efficacy of early childhood intervention that will increase the viability and acceptance of early childhood programs, and training graduate students who will continue to provide leadership.

Figure 3. Sites for a Sample of Twenty 1984-1985 Outreach Projects from HCEEP Project Evaluation



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Ⓐ - Ⓣ : Locations of FY 84 funded outreach projects.

A - T : Locations of outreach projects' planned activities.

* : The outreach project in D.C. has planned activities in Maryland only.

Accomplishments cited by the institute directors include helping to establish aresearch network in early childhood education that would not otherwise be created, disseminating research findings, and training future professionals, an accomplishment seen as having national impact.

COSMOS also evaluated the early Education State Grants program, which is intended to enable each State to plan, develop and implement a comprehensive service delivery system for special education and related services to handicapped children from birth to age five. Most States (all but three) are in the planning stage. The review indicated that States vary considerably in the extent to which services are currently provided to handicapped infants and preschool children, and in the extent to which legislation exists to support and mandate service delivery to this population. Of the 17 grantees included in the evaluation sample, all but one had developed or begun to organize an interagency group; these groups varied widely in size and type. The grantees reported a high level of interagency commitment and support. Other typical grant activities included conducting needs assessments, developing service delivery plans, and implementation. A descriptive summary of Early Education State grants is provided in Appendix D.

Technical assistance for the HCEEP program is provided by the Technical Assistance Development System (TADS) and the State Technical Assistance Resource Team (START). These organizations are funded by OSERS to help demonstration projects and State plan grantees in project implementation and evaluation, facilitate the utilization of knowledge and sound practice, disseminate information and foster networking; and serve as a resource for early childhood educators and practitioners.

The specific activities of projects funded under these HCEEP components, as well as early childhood projects funded through other programs, are described in the following sections. These projects are concerned with the development of interagency, interdisciplinary involvement to provide services to handicapped infants and young children; the process of referral, screening, evaluation, diagnosis, and tracking; intervention services; and personnel preparation. These projects serve as catalysts to stimulate program availability and as models for the delivery of services in the least restrictive environment. Early integration of young children with their nonhandicapped peers provides positive exposure for both handicapped and nonhandicapped children and sets a stage for their future education.

Interagency and Interdisciplinary Involvement in Early Childhood Education

Dunst, Snyder, and Mankinen (1986) identified four factors that indicate whether infants are likely to require early childhood education services: environmental factors (e.g., poor conditions of rearing); biological factors (e.g., Down's syndrome); medically-related factors (e.g., prematurity); and family or systemic factors (e.g., parental alcohol or drug abuse). These factors clearly illustrate the need for multiple agency, interdisciplinary involvement in the provision of services. Even those infants and families subject to only one of these factors may require an interdisciplinary array of services; yet many infants are subject to situations that involve more than one of these factors. Professionals from medicine, allied health, education, and social services are all required in order to provide the services needed by handicapped infants and their families.

Since the late 1960s, when Federal efforts to stimulate services to young handicapped children were emphasized, interagency cooperation has been an important and integral component characterizing early intervention programs funded under Federally supported activities. In addition to providing technical assistance for the development of early childhood State plans for comprehensive delivery systems, current HCEEP projects are demonstrating new methods of generating community involvement and interagency coordination in community-based programs.

Many of the projects involve the development of integrated medical, developmental, and family service approaches to early intervention, with training provided to family members. One of these is a multiagency community service project designed to meet the educational, medical, therapeutic, and social needs of handicapped and developmentally disabled children of drug-addicted parents (South Shore Mental Health Center, Brighton, MA). This project involves the collaboration of five State agencies, four medical institutions, and a network of professionals representing pediatric and adult health, education, drug treatment, and social service agencies. Services will be provided at alternative sites (hospitals, hospices, and foster homes for those who are unable to participate in existing programs because of communicable disease) and will include

- transdisciplinary assessment;
- intensive early intervention for the child and family;
- individualized service plans;
- services to improve parent-child interaction and caretaking skills, and provide support and education; and
- case management and transition services.

Other newly funded projects include an outreach project based on a family model with emphasis on interagency coordination to maximize sparse rural resources (Western Illinois University), including public health and physicians; and an outreach project that uses a transdisciplinary team to provide individual programs of comprehensive services selected from a service menu drawing on internal family resources and community resources (Dakota, Inc., Eagen, MN).

The following sections discuss the process of infant referral, screening, diagnosis, and evaluation; the provision of intervention services; and the preparation of personnel to deliver services.

Referral, Screening, Diagnosis, Evaluation, and Tracking

Scott and Hogan (1982) have described the primary sources of referral that lead to the early identification of handicapped infants. These referral sources include primary health care providers, such as neonatologists, pediatricians, and general medical practitioners who identify newborns having obvious disabilities; agencies or clinics which, though perhaps established for other purposes, come into contact with families of a handicapped or at-risk infant; social service providers, such as social workers or public health nurses who, in conducting visits to the homes of newborns, identify handicapped infants or home conditions that are not conducive to the child's health or development; and community referrals, in which community members are requested, through media notices, surveys or letters, to refer families having handicapped or at-risk infants to service agencies.

Following referral, interdisciplinary cooperation is necessary to conduct screening, diagnosis, and assessment. Specialists in various areas of child health and development contribute their expertise to assessing the child's developmental status. The team of specialists begins with screening procedures to determine if the infant's developmental status is such that further assessment is indicated. If so, diagnostic procedures are administered to more precisely determine the infant's developmental problems and to plan a specific intervention program. In performing this process, the skills of various specialists (e.g., audiologist, physical therapist, educator, social worker, pediatrician) are needed to develop a comprehensive assessment and prescription of the infant's development and an appropriate intervention program.

In some instances, immediate intervention may not be required, but the infant is followed on a regular basis through various tracking procedures, as discussed in the Eighth Annual Report to Congress. Tracking projects continue to be initiated, as exemplified at the University of Southern Mississippi, where a medical-developmental-family systems approach is being used to develop and implement a tracking and follow-along system for infants discharged from neonatal intensive care units.

The COSMOS evaluation of the HCEEP program found that all demonstration projects reported assessment or identification activities, and that their materials development activities included surveys, questionnaires, and assessment instruments. Current projects addressing identification and assessment include a project being conducted at Temple University, where services are provided to severely disabled infants from their entrance into neonatal intensive care units until they are placed into existing community programs. An infant coordinator provides behavioral and developmental interventions and a family coordinator provides counseling and training to family members.

Other discretionary programs support the expansion of the knowledge base regarding early intervention. For example:

- The Innovation and Development Program is funding a project at the University of Miami that is analyzing data to determine the incidence of educational handicaps among low birthweight infants born since 1975 as compared to infants of normal birthweight, to determine the proportion of special education and regular education students with normal birth histories, and to determine additional factors that may predict the subsequent need for special education services.

- The Field Initiated Research Program is funding a project at the University of Michigan to standardize English and Spanish versions of the Early Screening Instrument for preschool children. Another project, at the University of North Carolina-Chapel Hill, is studying the relationship between occurrences of otitis media (middle-ear infection) during the first three years of a child's life and a child's speech, language, and classroom performance during the school years.

Intervention Services

Early education intervention broadly refers to a program designed to provide optimal and developmentally appropriate activities to accelerate the infant's development or to lessen the effects of the handicapping condition. In total, the intervention program that results from the diagnosis and assessment of the child may consist of continuing medical care, physical therapy, family counseling, parental training, or other special services, in addition to the educational component. This total intervention program requires an interdisciplinary orientation to services and interagency coordination to assure that all appropriate services are provided.

The Early Intervention Effectiveness Institute at Utah State University is conducting 16 longitudinal studies of the efficacy and costs of early intervention. Six of the studies are designed to determine the effects and costs of different intensities of intervention; five studies will determine the effects and costs of beginning intervention at different child ages; and five studies are determining the effects and costs of varying the components of intervention programs (e.g., comparisons of different kinds and amounts of parent involvement). The studies include infants and toddlers with severe handicaps and sensory impairments, among other groups. The studies will provide information about intervention costs as well as information on the long-term outcomes of early intervention for children and families.

Several HCEEP demonstration projects are developing model programs for integrated preschools. These programs include curricula specifically designed for use in mainstreamed settings.

- The Cincinnati Center for Developmental Disorders is developing a model treatment service program to provide interdisciplinary educational and therapeutic treatment to handicapped, abused, and neglected children aged three to five in mainstream child care settings. The staff will provide direct treatment and remedial services to the children in the least restrictive educational setting and will hold weekly interagency, interdisciplinary conferences to revise and update the child's treatment status. One advantage of this model is that it is economical and provides a consistent therapeutic educational program for the child.

- ARC of Allegheny County, Pennsylvania is conducting Project Step-Up to prepare handicapped preschool children for the transition to a school-age program. The integrated preschool program will include specific social and pre-academic skills programming, parent training, and a sibling support group.

- The University of Hawaii is demonstrating an infant program service delivery model to support Hawaii's least restrictive environment continuum of placement alternatives for handicapped preschoolers. The project is preparing infants and their parents for the transition to preschool. An infant curriculum based on the skills necessary for preschool placement training is being developed along with parent training.

The University of Washington is developing a preschool curriculum that includes multi-level classroom activities for an extended school year, a teacher's manual with recommendations for classroom management and teacher training in the implementation of the Mediated Learning Program, and an assessment tool to identify children's cognitive strengths and weaknesses. The program will be implemented in Head Start Programs, preschools, and public school classrooms.

Other discretionary programs support the expansion of services to handicapped infants and the extension of the knowledge base related to intervention. For example, the Innovation and Development Program recently funded Appalachian State University to expand and analyze a data base on over 1,000 handicapped and developmentally delayed infants and preschoolers who were served by a regional early intervention program. The data base will be analyzed to determine the effects of early intervention and to examine other variables that affect the outcomes of providing early intervention. The Innovation and Development Program is funding another project at Appalachian State University that is conducting an independent analysis of the efficacy data base developed by the Early Intervention Research Institute at Utah State University. This project will provide additional information about the nature of the efficacy data base and will examine the conclusions that have been drawn about the efficacy of early intervention for handicapped, at-risk, and disadvantaged children.

Personnel Preparation

Personnel who deliver early intervention services to handicapped infants and their families must have a broad spectrum of skills (including the ability to communicate and coordinate with other team members) as well as access to other specialists who are qualified to deliver specific services for the benefit of the child and the family. The preparation of personnel to serve handicapped infants and children thus involves providing preservice training in the care of handicapped infants and children to professionals in a number of fields, adding new dimensions to university training programs; preparing personnel to serve in liaison/coordinator roles; and providing inservice training to a broad range of personnel, including educators, related services personnel, community service workers, and preschool and day care workers.

In 1985, a competition was established by the Office of Special Education Programs' Training Personnel in the Education of the Handicapped Program (EHA, Part D) to support the preservice preparation of personnel to provide services to newborn and infant handicapped children. The projects it supports prepare personnel to work in programs characterized by strong interaction of the medical, educational, and related services communities, and involvement of the parents or guardians, who are the primary care givers for these children. Some of these projects represent the development of new, jointly planned and implemented programs to train personnel to work with infants in a medical, educational, or community service role. Most of the projects train a variety of personnel from the allied health, education, and medical fields, and most represent collaborative efforts between institutions such as universities and hospital/medical centers; medical and nursing schools; service provision agencies; private, non-profit agencies; and government agencies. Some examples follow:

- A training program conducted jointly by Cincinnati University and the Cincinnati Center for Developmental Disabilities that is based on a successful interdisciplinary project model for comprehensive diagnostic and intervention services for high-risk or developmentally disabled infants.

- A summer institute at California State University at Los Angeles to train teachers of the visually handicapped to serve newborns and infants.

- A specialized infant internship for masters' level students in occupational therapy, physical therapy, speech, social work, and nursing; and a training program on working with the at-risk infant and family in the neonatal intensive care unit, transition to home management, follow-up developmental evaluation, and interface with community supportive services. All are in a combined program at the Eunice Kennedy Shriver Corporation in Waltham, Massachusetts.

The Training Personnel in the Education of the Handicapped Program's rural competition is sponsoring a project to train native and non-native Americans to work with native American preschool children in rural areas. Native American instructors and resource people will be used in planning, implementing, and evaluating the training model. Training Native Americans will primarily be done on three reservations.

The HCEEP program is also contributing to training effort of early intervention personnel by sponsoring demonstration projects for inservice training. For example, a newly funded demonstration project being conducted by the Kent State University Foundation provides multiagency, individualized training for families and professionals to enable them to work as partners, develop expertise on the care and management of infants with handicaps, and develop coordination and communication skills. The curriculum emphasizes the integration of professional and family perspectives. The project includes training components for senior medical students, pediatric residents, and families, and will provide information services for community service personnel. It will also hold a major interagency conference. Approximately 2,300 individuals will participate in training activities over the three-year duration of the project.

Although studies have shown that early intervention is beneficial to young handicapped children and can in some cases reduce the need for later services, a great deal is yet to be learned about the effectiveness of specific intervention strategies. Collaborative models for serving handicapped infants and young children with effective interventions delivered in least restrictive environments are beginning to be developed at sites across the country; however, services are not readily available in many areas of the U.S. Greater program collaboration is needed to make intervention services available throughout the nation in accordance with the least restrictive environment principle.

Transitional Services

Another programmatic area in which discretionary programs make an important contribution is that of services at the secondary level and for the transition from school to the world of work and community life. Coordination of education and other supportive services is complex for most educators and adult service providers. This section highlights some of the activities in which Federal discretionary monies are supporting efforts to develop and improve such coordination.

The culmination of education in the least restrictive environment is integration into the community and working life. To become successfully integrated, graduating students must possess the educational, social, and functional skills necessary for employment and community living. Employment and community adjustment are considered the primary criteria for assessing whether a handicapped youth has successfully made the transition from school to work. An increase in secondary program options, especially vocationally oriented programming, is needed in order to truly serve these students in the least restrictive environment.

The transitional needs of handicapped students are diverse: some individuals require few services, while others require a complex array of multiple services delivered by a broad spectrum of agencies. As was the case with early intervention service delivery, the complexity and diversity of needs and the wide range of potential service providers involved can make the coordination and delivery of transitional services difficult. A multidisciplinary approach that encompasses the coordination of services available from school personnel, adult service providers, employers, private and public agencies, and advocacy groups is critical if a foundation built upon secondary education and bridges leading to higher education, work, and adult life are to be provided.

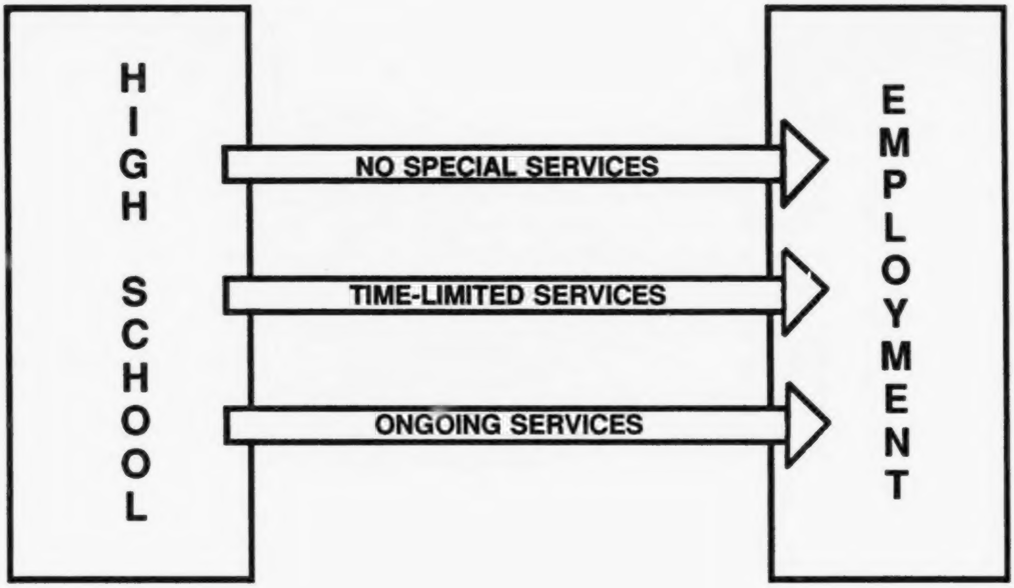
Preparation for the successful transition begins well before graduation, with early career assessment, vocational planning, and educational programming geared to the student's career aspirations. As discussed in the Eighth Annual Report to Congress, OSERS has developed a conceptualization of transitional services that includes three spans from secondary school preparation to adult life (Will, 1985). The spans differ in the extent and nature of services required for successful transition. As shown in Figure 4, the student who has completed the secondary school program may make the transition from school to work without special services (only those available to the public at large); with time-limited transitional services leading to independent employment; or with ongoing services, in the case of more severely handicapped individuals who may be unable to assume unsupported work roles. OSERS priorities regarding the transition to adult life include the following five target areas:

- Making high schools and their curricula more relevant to employment needs, which involves renewed cooperative efforts with vocational education and vocational rehabilitation to serve all students with disabilities, improving community-based job training and placement within the school's vocational preparation programs, and developing service models for all students that allow regular and frequent contact with nonhandicapped peers.

- Improving employment opportunities by cooperating with other agencies to develop a broader range of incentives for employers who offer jobs to individuals who may require special equipment, building modifications, longer training periods, or other investments.

- Improving programs for disabled high school graduates who seek additional education in community colleges or vocational technical postsecondary schools.

Figure 4. Major Components of the Transition Process


HIGH SCHOOL
NO SPECIAL SERVICES
TIME-LIMITED SERVICES
ONGOING SERVICES
EMPLOYMENT

- Improving time-limited services such as vocational rehabilitation, opportunities under the Job Training Partnership Act, and transitional employment. Again, this requires cooperative relationships between vocational education, vocational rehabilitation, and special education to ensure coordination in service responsibility. In addition, OSERS is encouraging and supporting innovations in on-site job training and placement programs to achieve greater effectiveness in time-limited services.

- Expanding the provision of ongoing support for employment, and encouraging new programs to offer ongoing support in a work setting to persons with the most severe disabilities.

The following sections discuss specific activities conducted under the discretionary programs to support these priorities. These sections address interagency coordination, secondary school programming, transition programming, and personnel preparation.

Interagency Coordination

The involvement of a wide range of organizations is required to ensure a successful transition to adult life for all handicapped students. These organizations include private and public rehabilitation, health and human services agencies, postsecondary educational institutions, and advocacy groups, as well as employers and educational agencies. Since vocational education and vocational rehabilitation have such potentially important roles in the preparation of handicapped students for employment and as service coordinators for graduates, the coordination of special education with these types of agencies is considered essential to the provision of quality, appropriate, comprehensive services. In addition, such coordination is necessary to ensure coordination in service responsibility as students graduate.

Thus, interagency coordination is a strategy for providing comprehensive services to handicapped students and ensuring that handicapped persons receive all of the services for which they are eligible under Federal and State statutes in special education, vocational education, and vocational rehabilitation. Interagency coordination is considered a necessary feature of service delivery if vocational services are to facilitate the movement of handicapped persons from education to employment (Decision Resources Corporation, 1985).

Projects funded under discretionary programs provide models that foster interagency coordination and develop linkages with a vast range of organizations that can facilitate the school-to-work transition. Some of these projects utilize coordinating councils as part of their transition programs, others provide community networking models, and still others focus on the development of linkages between specific service providers in the transition process. Some examples of such projects are highlighted below.

- The Sonoma County, California, Transition Project has a coordinating council to promote the active involvement of agencies in joint planning activities, the development of working agreements, and individualized transition processes. The project will develop a model adaptable to the needs of various communities, develop training modules for Statewide use, and provide guidelines and training materials for developing working agreements among local agencies, designating roles and responsibilities, and developing Individual Program Plans that serve as working agreements among all agencies and individuals concerned.

- Project PET is creating a model Community Transition Center and a community networking and interaction model in Montana. The project employs a planning committee that includes adult service providers, parents, school personnel, and employers.

- Long Island University in New York is developing a high school/college linkage model that focuses on collaborative linkages between secondary and postsecondary school personnel, parents, and learning disabled students to develop and demonstrate a transition support system.

- The Council of Chief State School Officers (CCSSO) is helping to foster replication of interagency linkage models by conducting a project to develop and disseminate programmatic models. The project will initiate and document four comprehensive interagency models to be developed by CCSSO's State members; planning conferences will be held and a report to disseminate the models for replication will be developed.

Since relationships between special education, vocational education, and vocational rehabilitation are of special importance in the preparation of handicapped youth for employment, a number of projects have been undertaken to look at and facilitate State and local coordination among these types of agencies. As reported in the Eighth Annual Report to Congress, Decision Resources Corporation recently conducted a study of interagency agreements to support the provision of vocational education and services to exceptional students. They studied three States and six school districts, and found that each State worked to develop interagency cooperation in a different manner. State approaches varied from providing technical assistance and consultation to local agencies (including training materials and manuals for vocational education teachers), to focusing on linkages between agencies at the county level, to developing a formal State written agreement. The LEAs used written interagency agreements, task forces on transition, special transition projects, and special purpose intermediate units to provide transitional services.

Another study, by Harold Russell Associates (1985) was also noted in the Eighth Annual Report. This study was a nine-site field study of exemplary State and local vocational programs. The study identified three trends in secondary programming:

- a growing number of programs focusing on ways to increase the participation of handicapped students in vocational education;
- increased coordination of academic, vocational, and work study opportunities into an integrated program for the handicapped youth; and
- vocational assessment is assuming a more important role as schools include vocational objectives in the IEP.

The following section discusses improvements in secondary programming and provides examples of programs illustrating these trends.

Secondary Programming

A successful transition to adult and working life requires appropriate planning and programming at the secondary level. Such planning and programming includes career assessment and program options that can support handicapped students' individual needs for vocational education, preparation for postsecondary education and training, and the social and functional skills needed for success in employment and community living.

The Harold Russell Associates study referenced above noted a trend towards increased vocational and career assessment. This trend is supported by models for career assessment developed under discretionary programs. For example, in Whittier, California, a project sponsored under the Secondary Education and Transitional Services for Handicapped Youth Program is expanding the services of an existing career assessment center to provide handicapped students with (1) vocational evaluation, (2) work adjustment, (3) employment preparation, (4) job development, and (5) placement, vocational counseling, and independent living skills training. The procedures involve IEP development, supplementary services, and family involvement. Manuals on each of the five service areas will be prepared and field-tested to facilitate replication of the project.

A number of projects are also modifying secondary curricula to provide models that involve more vocational education and community-based training and coordination of academic and vocational objectives in the IEP. For example, a project conducted by the University of Hawaii is using job coaches to provide secondary students 15 to 22 years old with on-site job training and counseling in work skills and habits, problem solving, and interpersonal communications. Family-employer liaisons and community-school representatives will focus on student IEP transition planning and postsecondary vocational program coordination. The students' secondary curricula will be modified and the project will disseminate procedural guides on transition to parents, adult services resource guides, inservice training materials, vocational curriculum task adaptations, and an ecological assessment instrument to assess the compatibility of secondary and postsecondary environments.

The University of Utah is conducting a research project to determine the effects of functional, adaptive, and severity factors (in addition to academic achievement) on the success of employment or postsecondary education of learning disabled individuals, and to determine curricular alternatives that will provide students with the skills needed for career success.

Two projects in North Carolina are addressing different aspects of community-based job training. The Experiential Prevocational Planning Project is at Employment Opportunities Incorporation in Durham, offering younger students job try-outs (work experience of 2 to 3 half days for 4 to 6 weeks) in an effort to intervene early in job planning to coordinate existing business, rehabilitative, educational, and therapeutic recreation services. The second project at the University of North Carolina provides students with a work history prior to graduation through volunteer experience, and places them in competitive employment following graduation.

In several sites, including ones in the States of Illinois (Thresholds, Chicago), and Iowa (University of Iowa), projects are studying the effects of generalization training and community-based instruction on the vocational performance of severely handicapped students. Using a behavioral analytical approach, individuals with more severe handicaps are being placed in competitive employment within their communities. These are individuals who previously would not have been considered employable.

Secondary curricula are also being modified to provide support to handicapped students who will be going on to postsecondary education. A project conducted by the New York State Education Department is developing linkages with the postsecondary system and employing cooperative planning and programming to strengthen the secondary programs of learning disabled students. It is expected that through cooperative planning and the linkages developed, students will have the necessary preparation for postsecondary success.

In addition to these efforts, the National Information Center for Handicapped Children and Youth (NICHY) and HEATH (Higher Education and the Handicapped) have clearinghouses to address questions and disseminate information on transition to work and higher education. NICHY also disseminates a newsletter on transition, and HEATH publishes a guide to choosing colleges for students with disabilities.

A different type of resource, one that matches employment information to disabled candidates, has been designed for high school graduates under the Secondary Education and Transitional Services for Handicapped Youth Program, and for disabled college graduates under the Postsecondary Education Program for Handicapped Persons. This activity at Long Island University called Project

Match, established a consortium of more than 80 schools in the New York City area and is a free service to link public and private sector employers access to a centralized data base of qualified, job-ready graduates. Professional staff screen applicants and provide follow-up services to ensure employer and employee satisfaction.

As discussed in the following section, further preparation and support for employment and postsecondary education is being provided through postsecondary transition programs.

Transition Programming

For students who have exited secondary programs, three paths to employment have been delineated. These are transition without special services (only those available to the public at large), transition with time-limited services, and transition to employment with ongoing support. A number of follow-up studies of high school graduates are currently being conducted to assess the success of students who make the transition without special services, and models for providing time-limited services and ongoing support through educational agencies, community colleges, and adult service providers continue to be developed. Examples are provided below.

Transition without special services. Handicapped individuals following this path do not require specialized supportive services in order to obtain or maintain employment. Data on the number of persons who successfully follow this path are incomplete, but a number of follow-up studies to assess the educational, vocational, and independent living status of handicapped youth have been undertaken. In P.L. 98-199, Section 618(e)(1), Congress mandated a longitudinal follow-up study to provide a comprehensive description of the transition status and needs of handicapped youth. The study was designed to include a sample of handicapped youth between ages 14 and 21, identified while still in school, who are representative of all categories of exceptionality. They have been selected on a stratified, random basis from all 50 States and more than 350 school districts. They will be followed for 5 years and their secondary experiences and transition experiences will be documented. In the fall of 1987, a contract will be awarded to implement the data collection, analysis, and reporting phase of this study.

The results of several smaller, more narrowly focused studies have provided some initial insights to the number of students who have found employment without special services: investigators in the State of Washington found that 72 percent of a sample of 827 learning disabled and behaviorally disordered youth were employed one year after leaving school. However, only 27 percent of those employed were earning the minimum wage or more. In Vermont, 55 percent of a sample of 301 educable mentally retarded, learning disabled, and emotionally disturbed youth were employed; of these, 83 percent had not used special support services to obtain their jobs.

Other smaller studies are currently underway. For example, the University of Pittsburgh is conducting an examination of the secondary school experience of learning disabled students and its value in preparing these youth for the transition to adult life. These studies will provide information on the status of students who make the transition to employment and adult life without special services, and estimates of their numbers.

Time-limited services. Time-limited services provide the vocational, social, and functional skills training needed for employment and community living, and on-site job training following exit from the secondary program. Examples of current projects include the following:

- A transition service model linking rehabilitation centers to the public schools is being developed by the Iowa University Foundation. Individualized Training Programs, including training sequences that specify the respective roles of special education and the rehabilitation center, are being developed for moderately and severely handicapped students.

- Time-limited services provided by community colleges are being expanded by non-degree programs such as the low-cost program under development at the City University of New York. The program is for learning disabled or mildly mentally retarded students with or without a high school diploma. Its two components focus on (1) basic and interpersonal skills and vocational training, and (2) hands-on work experience through internships.

- Another community college program model is being developed at the University of Oregon, where a 10-week Adult Life Skills Development course is being designed. The course features small-group instruction, a management information system, and job placement procedures.

- The Virginia Department for the Visually Handicapped is conducting a special demonstration project that involves a formal cooperative agreement with the Virginia Community College System. Working together, these agencies provide adaptive equipment that allows visually handicapped students to fully participate in computer-related courses. The project includes a work-experience phase accompanied by a training wage.

Transition with ongoing services. Supported employment provides work opportunities to individuals in a flexible fashion that meets the complex needs of severely handicapped individuals. A number of models for supported employment were described in the Eighth Annual Report to Congress. They are briefly reviewed here:

- The job coach/employment support model uses a job coach to train the employee on the job until he or she meets industry criteria and provides follow-up for the employee and the employer for as long as services are necessary.

- The employment training model trains several severely handicapped individuals at once in a time-limited, occupation-specific program. Once industry criteria have been met, the trainee is placed within the industry and given additional training as necessary by a job coach from the training program.

- The supported jobs model places individual adults in regular community jobs and provides support at the work site as required for the employee to learn and perform the work.

- The enclave model provides continuous ongoing support to a group of workers from a specially trained supervisor.

- The mobile crew model provides work crews consisting of a supervisor and approximately five employees; the mobile crews are set up as a small single-purpose business.

- The benchwork model was designed in the early 1970s to provide employment in electronics assembly work in a service agency which also functions as a business enterprise.

- The entrepreneurial model takes advantage of local commercial opportunities to establish businesses employing a small number of individuals with severe disabilities as well as individuals without disabilities.

Examples of these models in use were provided in the Eighth Annual Report to Congress. The effectiveness of these models and their adaptations is being demonstrated by new applications initiated by projects supported under discretionary programs:

- The effectiveness of three of the models, supported competitive employment, the enclave model, and the mobile crew model, are being demonstrated at Virginia Commonwealth University, where severely handicapped adolescents are being placed in these settings.

- Community Services for Adults and Children, Inc., in Rockville, Maryland, is developing a program to place autistic persons in non-sheltered community employment. An adaptation of the supported jobs model, the program provides clients with on-the-job instruction in travel, interpersonal and vocational skills, and training in daily living skills is provided in the community-based group home or in the community itself. Supportive services are gradually faded, although job performance continues to be monitored.

- The Perkins School for the Blind in Watertown, Massachusetts, is working with employers in private industry to establish a variety of supported employment sites, training deaf-blind students on job sites, and working with adult services agencies to provide follow-up and support services on a long-term basis.

Other projects are providing information to support the implementation of these employment models. For example, at the University of Wisconsin at Madison, a method for evaluating the vocational environments of students with severe intellectual disabilities is being designed. Information gathered during the design, field testing, and verification of the method will be communicated to those who provide vocational preparation, and an array of products will be developed to assist others in evaluating the vocational milieu of people with severe intellectual disabilities. In a second project at the same university, individualized adaptations that allow physically and intellectually disabled people to function productively in integrated environments are being developed. First, the performance of disabled workers is compared systematically with that of non-disabled workers; next, work tasks are selected and analyzed; adaptations are then designed and implemented. Appropriate job structuring, as exemplified by the supported employment models, accompanied by tools for evaluation and adaptation of work environments and tasks can help disabled workers reach their full productivity within integrated work settings.

The least restrictive environment for handicapped individuals as secondary students and as adults will only become possible with the provision of a wider range of employment options and secondary curricula leading to these options. Interagency coordination must make available the supportive services that enable individuals to select and use these opportunities. Federal initiatives will continue to be directed toward the development of secondary curricular and employment options through the support and encouragement of exemplary projects using resources at all levels, Federal, State and local.

Relationships Between General and Special Education

Effective implementation of the least restrictive environment principle requires a continuum of service options that enable all students to be integrated with their peers to the maximum extent possible. In the case of students with mild handicaps, the least restrictive environment is often the regular class. Strong relationships between regular and special education based on an array of administration and instructional arrangements are necessary if the needs of students who require special education are to be met in the least restrictive environment.

Increased attention has been given to relationships between special and regular education, and the instructional technology to support these relationships, as concern over the potential erroneous classification of students as mildly handicapped, especially learning disabled, has risen. The concern is that students who are marginally adequate learners may be referred for special education, labeled as "learning disabled", and removed from the regular class environment for at least part of the school day, when their difficulties could be remediated within the regular class setting without the potential for stigmatization that arises from being labelled handicapped. Associated with this concern is the idea that if learning problems are addressed early with appropriate intervention techniques, they are less likely to become more severe learning disabilities as the student's educational career progresses. If educators are to emphasize early intervention instead of responding to repeated failure, appropriate instructional techniques and program options must be available within the regular class.

Of the 42 million children in U.S. public schools in 1984-85, 1.8 million, or 4 percent, were classified as learning disabled and placed in special education programs. This figure represents 34,000 more students than in the previous school year. In addition, it has been estimated that another 10 to 20 percent of students have not been classified as handicapped, but have learning or behavior problems that limit their educational progress (Will, 1986). Thus, the population of interest in this issue includes students who have been or are at risk of being referred for evaluation and potential placement in special education.

An emerging type of preventive measure focuses on activities to enhance the capacity of general education to provide services to children at risk of being identified as handicapped. These activities include increasing coordination of the general and regular educational systems, improving procedures for evaluation and diagnosis, designing new program options to expand the general education repertoire, and transferring and adapting regular and special education instructional technology.

In 1985, OSEP began the Enhancing Instructional Options Grant Program, followed by Teaching/Learning Efficiency, followed this year by Increasing Teaching/Learning Efficiency. These projects enhance the capacity of local educational agencies to provide a variety of instructional options and screening procedures prior to the evaluation and placement of children with learning problems in special education. Examples of these projects, along with projects from other discretionary programs that support this area of development, are provided in the sections below. These research activities have been complemented by the Federal/State Evaluation Program which has provided SEAs support to study the effectiveness and impact of such efforts. These studies are presented in Chapter IV.

Coordination of Regular and Special Education

Increased coordination between regular and special education as well as coordination with other categorical programs such as those for disadvantaged, bilingual, and minority children is required in order to assure that students who need individualized help will receive that help in an appropriate and timely manner. The rules and regulations of these separate programs, as well as their funding mechanisms, can leave some borderline students without an appropriate mechanism to serve their needs, while others are forced to fit into a categorical program because that is the only available mechanism through which their needs can be met.

- In Washington State, the Office of the Superintendent of Public Instruction is conducting research to increase the number of tested models for keeping low-achieving students in the mainstream. The goal is to restructure services in the State for low-performing children. Outcomes of the project are expected to occur at various levels of the educational system: they will affect target children, school districts, and the Statewide organization of service delivery. Through this project, LEAs will develop five different program options to provide educational services and assessment to low-performing children within regular education. These models will be implemented in experimental schools and the results of implementation will be compared to control schools. Measures used to determine the effects of the models are student achievement and behavior, the number of children referred for special education services, and staff satisfaction with the models. The project will also assemble and work with leaders and representatives of various professional organizations representing teachers, superintendents and principals and others, as well as personnel from the pilot districts to identify needed changes in the regulatory service delivery system for low-performing students.

  This SEA is also conducting another research activity to develop a building-based change model which will lead teachers to modify their referral habits and provide instructional procedures so that learning disabled and other low-performing students will be effectively served in the regular classroom. The change model will focus on active leadership of the building principal and participatory management by the school staff. With support from special education and categorical program directors, principals will manage the change process and oversee the implementation of instructional strategies.

At the building level, mechanisms for increasing coordination and communication among special and regular education staff are needed. Special education teachers who work with students in small groups or resource rooms can be isolated from and afforded only minimal communication with regular education teachers. Instructional leadership and new systems of management are needed if special education expertise is to be put to more creative use. The Enhancing

Instructional Options Program is sponsoring several projects to examine ways of increasing communication between regular and special education teachers, thereby providing the teachers with supportive mechanisms.

- The University of Illinois at Chicago is undertaking a study to identify the characteristics of special education programs within high schools that are effective, moderately effective, and less effective, and to investigate the relationships between special and regular education within those schools. The researchers will then observe classroom characteristics and examine the match of curricular and setting demands between regular and special education classrooms. The data from these studies will be used to create a model of factors affecting the academic achievement of learning disabled students.

- The University of Texas is conducting a Statewide project to develop and validate a support system for meeting the needs of at-risk students. The support system is a collaborative consultation model for communication, coordination, and joint problem solving between regular and special education teachers. The project will determine and validate the teacher competencies needed for effective collaboration, and a Statewide sample of teachers will receive training in these competencies. The model will be evaluated on the basis of the effects of the training on special and regular teachers' knowledge, skills, and attitudes; and the impact of the collaboration on the incidence and nature of student referrals to special education.

- Vanderbilt University is assessing the effectiveness of a teacher-consultant model which involves a mainstream assistance team including a master teacher, a special education teacher, and the regular education teacher of a difficult-to-teach student. The model is being evaluated by measures of the numbers of services initiated, the frequency of reintegration, the target students' academic performance and behavior, the regular educators' instructional behavior toward similar students, and classroom teachers' participation in the IEP process.

- The Research Institute for Educational Problems is testing the effectiveness of a co-teaching strategy in which a regular education content area specialist co-teaches with a special education teacher. Tutorial hours will be available in which students can receive individual attention to work on deficient skills in reading and language arts.

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Referral, Evaluation, and Diagnosis

In their efforts to maintain students in the least restrictive environment, educators are looking with renewed interest at the process by which students are referred for special education. Several examples of projects underway to improve referral procedures and increase diagnostic accuracy were discussed in Chapter 4 of the Eighth Annual Report to Congress. Additional examples are provided below:

- The Yale School of Medicine is in the second year of a longitudinal study to examine the definition of learning disability and determine its prevalence, incidence, stability, and clinical correlates of its psychometric definition. The study will differentiate children identified by the school system as learning disabled from those who are low-achieving but not learning disabled. The study will follow the patterns and changes over time of these groups while monitoring and assessing the effects of special services on school performance, academic achievement, behavior, and self-concept.

- A study conducted at the University of California at Santa Barbara represents an effort to describe variables that affect whether a low-achieving student is referred for special education placement. The investigation will also examine whether the social skills curriculum reduces unnecessary referral and inappropriate placement in special education.

Program Options Bridging Special and Regular Education

An increased array of program options is needed in order to allow regular teachers the flexibility to individualize students' programs to meet their varied needs. The increasing array of program options being developed for handicapped students may benefit low-performing nonhandicapped students as well. For example, one project, Improving the Options of Handicapped Students in Mainstream Vocational Education, is attempting to expand vocational program options for handicapped students by developing detailed information on at least 600 handicapped students participating in exemplary vocational education programs. The data on these students and programs will be analyzed to determine the characteristics of students who participate and succeed in different types of programs, the characteristics of institutions and programs that have been successful in mainstreaming handicapped students, and data on resources and program strategies to increase the success of mainstreamed students and their costs.

A number of projects are studying the environmental variables that are crucial to student success:

- The University of Minnesota is studying the effectiveness of differing instructional arrangements for mildly handicapped students in regular education settings. The variables studied include class size, size of instructional group (small, large, individual), degree of structure, and extent of direction by special education or related services personnel. The effects of various instructional arrangements on academic engaged time (time on task), quality and effectiveness of the environment, task completion, and task comprehension will be documented.

- The University of Kansas is identifying effective instructional arrangements and procedures currently used by teachers in mainstream settings. The effectiveness of arrangements and procedures will be gauged by students' academic performance. These arrangements and procedures will then be analyzed and used with new samples of students to test their generalizability across teachers and students. Important classroom instructional variables and effective procedures can then be documented for dissemination and use by teachers in the least restrictive settings.

- The University of Virginia is studying regular classroom teachers who have been successful in their interactions with mainstreamed learning disabled students; teacher thinking and behavior will be analyzed in order to develop a model of effective practice. The project also includes a training component which will enable special education resource teachers to provide assistance to regular classroom teachers.

Transfer of Instructional Techniques

Increased coordination and communication between regular and special education teachers will facilitate the transfer of technology between these fields. The teachers can share techniques they have found to be effective and engage in joint problem solving. In addition to system level encouragement and the opportunity to share information, known techniques that are effective in special education are being tested for use in mainstream classes, new techniques for intervention with low-achieving students are being devised, and strategies for adapting curricula for students with learning problems are being developed. Examples are provided below.

- The University of Illinois is examining the efficacy of peer collaboration as an intervention to enhance the ability of classroom teachers to meet the needs of students with mild learning and behavior problems within the regular classroom. The research will identify classroom characteristics and successful pre-referral interventions, and then will examine whether peer collaboration can be used to expand a teacher's repertoire of alternatives to meet the needs of students with mild learning and behavior problems within the regular classroom. Teachers will be paired with collaborators who have had training in instructional management strategies and strategies to increase self-appraisal; training materials in these topics will be field-tested to see if peer collaboration is a realistic model that can be easily adopted.

- Vanderbilt College is investigating specific teacher behaviors and strategies that have been demonstrated to exert positive influences on student achievement in regular classes (e.g., academic feedback, structuring and directing, monitoring a planned explanation) to see if they have the same effect on mainstreamed mildly handicapped students. Effective strategies will then be incorporated into a teacher training package.

- A project sponsored under the field initiated research competition is assessing the effectiveness for learning disabled students of a study technique to increase reading comprehension. The technique, called SQ3R for Survey, Question, Read, Recite, and Review, has been widely endorsed for use with students in regular classroom settings, but it has not been adequately researched to determine its effectiveness with handicapped or learners. The project is conducting a series of related studies to assess the efficacy of the technique for learning disabled secondary students.

- The University of Washington is examining three approaches to the modification of textbooks used by secondary learning disabled students in regular classrooms. The approaches are Precision Teaching plus framed outlines, advance organizers, and graphic presentations. The approaches will be used with mainstreamed students in regular classrooms; textbooks will be modified for alternate assignments, (i.e., no modification for one chapter, a modification for the next, etc.). The approaches will be compared by measuring student acquisition of information, retention, and application. Teachers, students, and staff will be asked about the usefulness and cost of the modifications. The outcome of this research will enhance the ability of mainstreamed handicapped students to effectively learn the content of the secondary regular education classroom.

There is a need to ensure that all students receive appropriate special instructional assistance when they need it, and greater individualization of instruction can help to fill this need. The transfer of management practices and instructional technology between regular and special education is called for not only to address the needs of low-achieving nonhandicapped students, but also to assure that students are not misclassified as handicapped. It is believed that appropriate treatment for learning problems as they arise can forestall their becoming more severe, or compounded with motivational or attitudinal problems as students' frustrations increase.

In taking this preventive approach, OSERS is beginning to direct study to this area, which calls for greater coordination between regular and special education, new mechanisms of support for regular education teachers with problem learners, new referral procedures and more accurate diagnostic techniques, and both new and adapted instructional strategies.

Expenditures

Although it has been widely recognized that the use of Federal funding authorities by the States is a continuing source of support and means for improvement of services to the Nation's handicapped children, expenditure data were not reported. This Annual Report marks the first time that information has been available to indicate the amount and range of all sources of funding for special eduction and related services by the States and Insular Areas.

The 1984-85 Annual Data Reports included a data requirement, mandated by Section 618 of the EHA Amendments of 1983, that States report funds expended for special education and related services during school year 1982-83. These funds were to include all costs associated with services to handicapped children and youth that are above and beyond the costs of providing regular education programs to nonhandicapped students. Costs associated with capital outlays or regular education services were not included.

States were required to report expenditures for both special education and related services according to the funding source; that is, States were to specify expenditures according to Federal, State, or local source. States were permitted to estimate expenditures for special education and for related services. Reports of total expenditure by source of funds expended, however, were to be actual amounts.

Despite a lack of familiarity with these new requirements, one-half, or 27 of the 54 States and Insular Areas that submitted these data provided both actual total expenditures by source of funds expended and separate counts of expenditures for special education and for related services. Of these 27 States, six identified actual amounts expended for special education and related services; 21 States estimated these two amounts.

National Summary

For 1982-83, the States and Insular Areas reporting spent almost $12 billion on special education and related services (see Appendix Table EJ1). This was a per pupil expenditure for the excess cost of special education, based on total funds expended for all children served under EHA-B and Chapter 1 of ECIA (SOP), of $2,788. About 8.5 percent of these monies were attributed to Federal sources, about 54 percent to State sources, and 38 percent to local sources. Approximately 60 percent of the total was expended for special education programs, the remainder for related services. Federal sources accounted for 8.8 percent of the monies expended on special education programs and 11.2 percent of the monies expended on related services.

State Level Analyses

Per Pupil Expenditures

To describe differences in funds expended by States, per pupil expenditures were calculated by dividing total funds expended by the number of children reported as being served under EHA-B and Chapter 1 of ECIA (SOP) in 1982-83. State per pupil expenditures for special education and related services ranged from $659 to $5,970 (see Table 30). The median per pupil expenditure was $2,622; the modal range was $2,500 to $3,000.

Proportion of Total Expenditures Attributed to Special Education and Related Services

The proportion of total expenditures attributed to special education, as opposed to related services, was calculated for 46 States and Insular Areas because some States did not provide data separately for special education and related services. The proportion of total expenditures designated as special education expenditures ranged from 40 percent to 96 percent. Conversely, expenditures designated as spent for related services ranged from 4 to 60 percent. About half of the States providing data reported between 80-89 percent of the total expenditures were for special education programs, and 11 to 20 percent was spent for related services. The median proportion spent for special education was 84 percent; the median proportion spent for related services was 16 percent. Table 31 reports the range of proportions reported.

TABLE 30

Per Pupil Expenditures for Special Education and Related Services

1982-83

Range of Expenditures (in dollars)	Number of States[a]
0 - 500	0
500 - 1,000	3
1,000 - 1,500	6
1,500 - 2,000	8
2,000 - 2,500	7
2,500 - 3,000	14
3,000 - 3,500	11
3,500 - 4,000	4
4,000 - 4,500	0
4,500 - 5,000	0
5,000 - 5,500	0
5,500 - 6,000	1

[a] Includes data from 50 States, D.C., Puerto Rico, Guam, and the Bureau of Indian Affairs.

Proportion of Total Expenditures Funded by Federal Sources

For the States and Insular Areas, Federal sources funded between 3.48 percent and 73.13 percent of total expenditures for special education and related services.[3] Guam reported the highest proportion--73 percent. Puerto Rico and the District of Columbia followed, reporting 29.45 percent and 20.77 percent, respectively. The median proportion of expenditures funded by Federal sources was 9.95 percent. The most typical proportion, the modal proportion, was between 8 and 9 percent. Table 32 summarizes the range of proportions reported by States and Insular Areas.

Proportion of Expenditures for Special Education Funded by Federal, State, and Local Sources

For the States and Insular Areas, Federal sources funded between 1.21 percent and 75 percent of the expenditures for special education only.[4] Guam reported the highest proportion, 75 percent. Puerto Rico followed, reporting 25.5 percent. For the States and the District of Columbia, all percentages were at 18 percent or below. The median proportion for all respondents was 9.84; the modal response was between 8 and 9 percent.

To determine the proportion of expenditures for special education from State sources, responses from States reporting expenditures from both State and local sources were analyzed. Responses from unitary systems, i.e., Hawaii, the District of Columbia, Puerto Rico, Guam, and the Bureau of Indian Affairs, and States unable to separate expenditures from State and local sources were excluded. According to the information provided by 39 States, expenditures for special education from State sources ranged between 23.36 and 88.38 percent. The median proportion reported was 62.87; the typical proportion, the mode, was between 65 and 69 percent.

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[3] This range excludes percentages reported by New Mexico and the Bureau of Indian Affairs. New Mexico did not participate in the EHA program during school year 1982-83, and the Bureau of Indian Affairs is supported entirely by Federal funds.

[4] This range excludes percentages reported by New Mexico and the Bureau of Indian Affairs, which reported 0 percent and 100 percent of expenditures from Federal sources.

TABLE 31

Proportion of State Expenditures for Special Education and Related Services

1982-83

Proportion of Total Expenditures		
Special Education	Related Services	Number of States[a]
90-99	1-10	9
80-89	11-20	24
70-79	21-30	6
60-69	31-40	4
50-59	41-50	2
40-49	51-60	1

[a] Includes data from 42 States, D.C., Puerto Rico, Guam, and the Bureau of Indian Affairs.

TABLE 32

Proportion of Special Education and Related Services Expenditures Funded by Federal Sources as Reported by the States

1982-83

Range of Proportion	Number of States[a]/
0 - 1	1
2 - 3	0
4 - 5	4
6 - 7	7
8 - 9	13
10 - 11	5
12 - 13	7
14 - 15	4
16 - 17	6
18 - 19	2
20 - 21	2
28 - 29	1
30 - 100	2

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a/Includes data from 50 States, D.C., Puerto Rico, Guam, and the Bureau of Indian Affairs.

As in the analysis describing special education expenditures funded by State sources, the analysis describing special education expenditures funded by local sources included responses from States reporting expenditures from both State and local sources; responses from unitary systems and States unable to separate expenditures from State and local sources were excluded. Information from these States indicated that expenditures for special education from local sources ranged between 4 and 66 percent. The median response was 27.47 percent; the modal response fell between 20 and 24 percent.

Proportion of Expenditures for Related Services Funded by Federal, State, and Local Source

For the States and Insular Areas, Federal sources funded between 2 and 66 percent of total expenditures for related services only.[5] The reported median proportion was 15.24 percent. Modal responses indicated the most typical Federal proportion was between 5 and 9 percent.

To determine the proportion of expenditures for related services from State sources, information from States that reported expenditures from State and local sources were analyzed; responses from unitary systems were excluded. According to the data provided by 39 States, expenditures for related services from State sources ranged between 11.95 percent and 86.23 percent. The median proportion reported was 49.5. The modal responses indicated that the typical proportion was between 65 and 69 percent.

As in the analysis describing related services funded by State sources, this analysis included States that reported expenditures for related services from State and local sources; unitary systems were excluded. Responses from these States indicated that expenditures for related services from local sources ranged between 4 and 79 percent. The median proportion was 27 percent. The modal responses indicated that the typical proportion was between 15 and 19 percent. Thus, States are contributing approximately equal proportions for special education and related services, whereas local educational agencies are contributing proportionately more for special education than related services.

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[5] This range includes responses from 41 States, the District of Columbia, Puerto Rico, Guam and the Bureau of Indian Affairs. Percentages reported by New Mexico and the Bureau of Indian Affairs, which reported 0 percent and 100 percent of expenditures from Federal sources were excluded.

Efforts to Assess and Assure the Effectiveness of Programs Educating Handicapped Children

The Education of the Handicapped Act (EHA) Section 601(c) states four purposes, the last of which is "to assess and assure the effectiveness of efforts to educate handicapped children." Section 618(a)(1) requires the Secretary to "assess progress in the implementation of this Act, the impact, and the effectiveness of State and local efforts to provide free appropriate public education to all handicapped children and youth." The Secretary continuously conducts such assessments based on reviewing State plan applications, monitoring of State efforts to implement the requirements of the Act, and evaluating educational programs. Similarly, State educational agencies in accordance with Section 614 of the EHA require submission and review of applications from local educational agencies or intermediate educational units which desire to receive payments under this Act. Further, the U.S. Education Department General Administrative Regulations (EDGAR) 34 CFR 76.101 require that State educational agencies must monitor and evaluate such programs. This chapter reviews these Federal and State efforts to assess and assure the effectiveness of the education of handicapped children.

The chapter presents a description of Federal and State efforts to monitor the development and implementation of policies and procedures to provide all handicapped children a free appropriate public education consistent with EHA requirements. The monitoring procedures and their findings provide evidence of the national effort being made to assess and assure the implementation of the Act. The following section describes Federal and State efforts to evaluate program impact and effectiveness, which complement the monitoring efforts to improve program quality.

Program Review

In order to carry out their responsibility to assess and assure the implementation of a free appropriate public education for all handicapped children, Federal and State agencies have developed and refined program administrative review procedures. These program compliance review procedures have been instituted to assess and assure that policies, procedures, and practices related to the education of handicapped children are consistent with Federal and State statutes and regulations. This section of the chapter describes the Federal procedures and findings associated with State plan review and compliance monitoring. The section also describes the results of State educational agency efforts to assess and assure that State-operated and State-supported programs, local educational agency programs and intermediate educational agency programs are educating handicapped children consistent with Federal and State statutes and regulations.

OSEP Review of State Programs

The program review process has two parts--review of plans submitted by States for their EHA-B State Grant Program funds, and monitoring to assure adherence to State Plans. This section of the report describes the new procedures developed for submission and review of State Plans, and provides a detailed description of OSEP's revised comprehensive compliance review system.

The purpose of the OSEP review of State programs is to identify and correct discrepancies between Federal statutory and regulatory requirements and State plans, policies, procedures, and practice. Thus, the objective of OSEP's review and monitoring activities is to determine compliance and remedy, if necessary, any areas of noncompliance. These OSEP compliance activities are not designed to identify and promote exemplary or promising practices. The discretionary programs described in the previous chapter are the means by which new and innovative practices are being developed, demonstrated, and disseminated. Consequently, this section provides a limited description of the national progress being made to provide all handicapped children a free appropriate public education. States have made significant advancements in improving the availability and quality of education for all handicapped children. These improvements have been documented in previous Annual Reports to Congress as well as elsewhere in this report.

The issues identified by the OSEP review of State programs reflect a second generation of problems which represent those most complex and resistant to change. In addition, States are being challenged to maintain adequate documentation. The findings of Federal and State monitoring suggest that the corrective actions are most often a need for refining or expanding current procedures and practice.

State Plan Review

In the spring of 1986, OSEP began implementing a staggered State Plan review schedule. The authority for this action is set out in Section 76.103 of the Education Department General Administrative Regulations (EDGAR), which states:

> If the Secretary determines that the 3-year State Plans under a program should be submitted by the States on a staggered schedule, the Secretary may require groups of States to submit or resubmit their plans in different years.

To implement the staggered State Plan procedures, States were divided into three groups. Group I was approved for one year (FY 87), Group II for two years (FY 87-88), and Group III for three years (FY 87-89). However, subsequent State Plan submissions for Groups I and II are for a 3-year period. These groupings are based upon OSEP's monitoring schedule. A staggered schedule facilitates coordination between State Plan preparation and OSEP monitoring findings by allowing States to use the results of monitoring visits to revise State Plans in a more timely manner.

In order to ensure that States maintain their eligibility for funding during the conversion period, the following requirements for submission were met during FY 86:

- Groups I and II - Each State submitted a letter indicating that the unchanged portions of its FY 84-86 State Plan are incorporated by reference for FY 87, for States in Group I, as well as for FY 88, if the State is in Group II. Amendments to the plan that were subsequently approved by OSEP after the original plan was submitted could also be incorporated by reference. Also, in submission letters, the States (1) identified any changes in its FY 84-86 plan that were not previously approved by OSEP and (2) attached copies of the changes to the letter.
- Group III - Each State in Group III submitted a complete State Plan package.

The States have been assigned to Groups I-III based upon the date of the last monitoring visit, as shown in Table 33. In reviewing State plans submitted by States during the past year OSEP found, as most common, the problems listed in Table 34. Each of these problems is discussed below.

Public participation. The EHA regulations require States to hold public hearings and to make the State's Plan available for comment by the general public. In many cases, States failed to meet the public hearing requirement, for example, if only one hearing was conducted in a single location. This one hearing could not meet the intent of the requirement, especially when large States were involved. It proved difficult for the public to make substantial verbal comment if the location of the hearing was not in a city convenient to the commentator. Many States submitting full plans were required to hold more than one public hearing to remedy this problem.

Time latch on due process appeals. Several State Plans contained an administrative provision allowing a time period to elapse after which parties to a due process hearing could no longer appeal the hearing decision. This provision effectively allowed the party ordered to implement the decision to delay implementation of the hearing officer's decision. The child involved would be protected from needless changes in placement or program until the time for appeal had passed. The pendency requirement always remains in place through a judicial proceeding, but in this case it collapses after the time latch since the parties to the hearing relinquish their right to appeal after the time has passed.

TABLE 33

Assignment of States to State Plan Submission Groups I-III

Group I: Monitoring visits completed during 1984-86.a/

Delaware
Minnesota
Hawaii
Trust Territories
Texas
Nevada
West Virginia
Ohio
South Carolina
Kentucky
Guam
Georgia
Virgin Islands
Oklahoma
Arkansas
Rhode Island
Louisiana
California
American Samoab/
Massachusetts
Indiana
Kansas
Maryland

Group II: States to be monitored in school year 1986-87.

Vermont
Nebraska
Missouri
Florida
Bureau of Indian Affairs
New Mexico
Mississippi
Oregon
New Jersey
Colorado
Pennsylvania
Maine
Tennessee
Alabama
Alaska
Michigan

Group III: States to be monitored in school year 1987-88.

Iowa
District of Columbia
Illinois
Virginia
Idaho
New Hampshire
Connecticut
Wyoming
North Dakota
Puerto Rico
Utah
Montana
New York
Wisconsin
South Dakota
Washington
Arizona
North Carolina

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a/ Includes pilot visit of Delaware for development of new monitoring procedures and technical assistance visits to Trust Territories, Guam, Virgin Islands, and American Samoa to assess and promote the full implementation of EHA-B.

b/ American Samoa submitted a complete individual State Plan for FY 87-89 subsequent to the visit.

TABLE 34

Occurrence of Discrepancies in Review of 18 State Plans

Discrepancy	Number of States
Public Participation	8
Latch on Due Process Appeals	4
Counting Students without IEPs	0
Counting Students in Categories not Consistent with Federal Categories	0
Mediation as Barrier to Due Process	1
Content of Notice to Parents	10
Monitoring Procedures	10
LRE Assurances	10

OSEP found that any time latch less than 30 days was a violation of the EHA and required States with a provision of less than 30 days to remove the procedure from their Plan. In a few cases the time latch was increased to meet the 30-day criterion. No problem was cited by OSEP if a State's latch extended beyond a 30-day period.

Mediation as a barrier to hearings. Some States required mediation as a prior condition to granting a due process hearing. The requirement of participation in the mediation process is a violation of the EHA and therefore must be removed from a State's Plan. A few States offer the opportunity for a parent to elect mediation as a way of settling a disagreement. OSEP sees the use of mediation as a benefit to parents and children with handicapping conditions, however, States must be careful that mediation is not a condition of the right to a due process hearing.

Inconsistent categories of handicapped children. States have been given the opportunity to name or designate categories of handicapped children with appropriate discretion. This leads to categories of handicapped children which on their face do not appear consistent with the Federal categories. In reviewing these categories for consistency, plan reviewers in OSEP found inconsistencies with Federal regulations. Examples include the use of a category for pregnant teenagers, delinquent adolescents, and socially maladjusted children. These inconsistent categories were removed from State Plans.

Monitoring procedures. Each State must develop monitoring procedures to ensure that LEAs are in compliance with specific requirements of the Act. In many cases reviews of these procedures found that many requirements of the EHA were not monitored. In some cases, States found noncompliance, but did not take action to ensure compliance. The OSEP review identified the deficiencies in the monitoring procedures, and the States then made the adjustment.

LRE assurances. OSEP reviews yielded information that States were unable to furnish the appropriate assurances, through the policies and procedures found in LEAs, that children with handicapping conditions could be ensured placement in the least restrictive environment. The necessary changes in Plans were addressed by the States.

Defective parent notice. As OSEP reviewed the content of notice to parents it was found that States in some instances were unable to furnish parents with adequate notice. In some cases the notice was incomplete because it omitted portions of the requirements in the regulations for EHA; in other cases the notice itself was not clear.

Counting children without IEPs. In some reviews of State Plans it was noted that children would be counted before an IEP was developed. In these situations children were counted under EHA, had evaluations performed by qualified professionals, but IEP meetings had not been conducted by the public agency. Serving children with handicapping conditions without an IEP is inconsistent with EHA since children cannot receive special education and related services and be counted under EHA, unless they have an IEP.

Compliance Monitoring

During school years 1984-86, OSERS implemented a substantially revised and improved OSEP monitoring system related to EHA-B and States' implementation of other relevant Federal acts. This refinement of OSEP procedures is the basis for significant improvements in monitoring techniques and approaches. Although the new system is not fully operational, it was field tested in Delaware, and implemented in May 1985. OSEP has monitored the 18 States listed in Table 35.

Description of the comprehensive compliance review system. The authority for OSEP compliance monitoring activities is contained in two Federal provisions: Section 616 of the EHA-B and 74.85 of EDGAR. OSEP's mechanism for determining SEA compliance with all Federal provisions and with the content of an approved State Plan is its Comprehensive Compliance Monitoring System. Section 616(a) of the EHA-B requires the Department to withhold funds if the Secretary, "finds (1) that there has been a failure to comply substantially with any provision of Section 612 or Section 613, or (2) that in the administration of the State Plan there is a failure (by a State) to comply with any provision... or with any requirements set forth in the application of a local educational agency or intermediate educational entity approved by the State educational agency pursuant to the State Plan..."

OSEP's revised comprehensive compliance monitoring system. Prior to 1984 OSEP's compliance monitoring of SEAs was premised on periodic (approximately every 3 years) program administrative reviews. As redesigned, OSEP compliance monitoring activities now emphasize the ongoing collection, review, and analysis of information to ensure full implementation of Federal requirements at the State and local level. The compliance monitoring system emphasizes structured interaction with each SEA and is implemented through five components of OSEP's Comprehensive Compliance Monitoring System. The five components are:

- Annual Performance Reports and Data Review;
- State Plan Review and Approval;
- Comprehensive Compliance Review;
- Verification of Corrective Action Plan Implementation; and
- Specific Compliance Review.

A description of how each of the components in OSEP's Comprehensive Compliance Monitoring System is used to review SEA compliance with applicable Federal requirements is provided below.

Annual Performance Report and Data Review. A fundamental component of all OSEP compliance monitoring activities is the annual analysis of data and performance reports submitted by SEAs and other information readily available to OSEP. SEAs are required each year to submit to OSEP several types of information concerning the availability of special education programs within the State, including the numbers of children receiving special education and related services, exiting from special education, and placed in differing educational settings. Other required information includes: estimates of the anticipated transitional services needed for children exiting school, an identification of the types of personnel currently employed and needed, a description of services needing improvement, and an analysis of the expenditures of State and local funds

TABLE 35

States Monitored Since May 1985

State	Monitoring Dates
South Carolina	May 6-10, 1985
Louisiana	June 10-14, 1985
Minnesota	July 8-12, 1985
Kentucky	August 19-23, 1985
California	September 19-27, 1985
Hawaii	September 15-28, 1985
Indiana	November 18-22, 1985
Kansas	December 9-13, 1985
Georgia	January 13-17, 1986
Arkansas	January 21-24, 1986
Ohio	January 27-31, 1986
Maryland	February 3-7, 1986
Massachusetts	March 10-14, 1986
West Virginia	March 23-28, 1986
Oklahoma	March 31-April 4, 1986
Texas	April 14-19, 1986
Nevada	April 20-25, 1986
Rhode Island	June 2-6, 1986

on special education. Information from other surveys, such as those conducted by the Office for Civil Rights and the Office of Adult and Vocational Education, is also used. By examining these data, OSEP is able to screen for potential compliance related issues, and to assist States in improving their own information systems for similar use in screening local and intermediate educational unit program performance.

This information is used to analyze individual State performance and national trends regarding the nature and status of special education and related services available for all children with handicaps. While this information is not used as a basis for determination of compliance, it is used to identify trends which may reflect problems in the implementation of Federal requirements.

Comprehensive Compliance Review. The on-site comprehensive review of SEA administration of EHA-B every three years is the most extensive component of OSEP's program review system. A comprehensive compliance review includes an on-site visit to the SEA and on-site visits to selected educational programs within the State. The review examines all applicable State policies and procedures designed to implement Federal requirements.

The comprehensive compliance review process is comprised of six activities:

1. Selection of SEAs to be monitored. SEAs are selected on the basis of when they were last visited, their compliance history, complaints filed with either OSEP or OCR, and information already collected by the U.S. Department of Education. Sources of existing information include OSEP child count data, OCR surveys, and vocational education data submitted to the Department. Ongoing procedures ensure effective communication with concerned parent and advocacy organizations.

2. Development of OSEP monitoring plans. A compliance monitoring plan for each State is developed using existing information. The plan includes (a) an off-site review of information; (b) a compliance assessment based on documentation submitted by the SEA; (c) an identification of compliance requirements in need of further review; (d) a specific plan for the acquisition of information needed to establish SEA compliance/noncompliance with relevant requirements; (e) a list of sites to be visited; (f) a tentative agenda for the on-site (and remaining off-site) phase of the review; and (g) projected timelines for completion of review with appropriate milestones.

3. On-site review of information. During the on-site review, an OSEP monitoring team uses standard procedures and instruments to (a) obtain information from parents and

advocates concerned with special education within the State or local school system; (b) interview appropriate staff; (c) review files and records using file extraction formats; and (d) obtain input from appropriate service providers (State schools, other State agencies and LEAs), where necessary.

4. Compliance assessment. During the compliance assessment phase, an OSEP monitoring team reviews and analyzes all information and clarifications obtained prior to and during the site visit to assess compliance with Federal requirements.

5. Issuance of a compliance monitoring report. The report of each compliance monitoring review is prepared based on a standard format structured to address the areas of SEA administrative responsibility. The report includes a specific citation for any identified deficiency. The report also specifically describes the documentation reviewed, summarizes the facts discovered, and stipulates required corrective actions.

6. Development of a corrective action plan. If noncompliance is determined, a corrective action plan is developed by each SEA after receipt of the compliance monitoring report. This report includes, at a minimum: (a) a description of steps to be taken by the SEA to correct deficiencies; (b) a timeline for completion of all steps; (c) an identification of any item needing clarification; and (d) a detailed description of the documentation to be submitted verifying completion of the correction of deficiencies.

Follow-up Verification and Support of Corrective Action Plan. The procedures of this component are designed to ensure that all agreed-upon corrective actions are implemented and that the technical support which OSEP agrees to provide is delivered. Follow-up verification and support can occur as a result of any one of the four compliance review components listed above.

Specific Compliance Review. The specific compliance review is focused on those SEA administrative responsibilities which have been identified for indepth analysis by OSEP on the basis of compliance history, State Plan review, OCR and OSEP complaints, or analysis of annual data and performance report information. This component of the compliance review system may also be used to resolve problems which States have identified as pressing. These reviews emphasize ongoing communication and may include State visits by OSEP staff or consultations with State officials in Washington to discuss ongoing problems, negotiate solutions, and agree on corrective action plans. In instances where a problem requires more intensive data collection, a specific compliance review may include on-site investigations at the State and local levels.

Additionally, OSEP may use specific compliance reviews to focus on one or more requirements in several States at the same time. If a requirement or set of requirements is identified as an issue which arises in many States, it may be advantageous to review the implementation of this requirement in more than one State. In such cases, trends may be identified which will allow for intensive assistance to States on that specific issue or a review of existing policy and practice. When a specific compliance review cuts across several States, the review will be more intensive and may, therefore, require a review of programs at the local level.

Findings since May 1985 monitoring reviews. The Division of Assistance to States has completed 18 Comprehensive Compliance Review site visits and analyzed the results. The findings are summarized in Table 36. The table presents the frequency of noncompliance findings with EHA-B requirements which were identified as a result of OSEP monitoring. As indicated, on the basis of 18 compliance reviews, there are continuing problems in the area of SEA monitoring, general supervision, and least restrictive environment. In addition, the complaint review process and the development of a Comprehensive System of Personnel Development (CSPD) are problem areas. These frequently cited findings of noncompliance with EHA-B requirements are discussed below.

State educational agency monitoring. Each State is responsible for the adoption and use of proper methods for the monitoring of agencies, institutions, and organizations in the State providing education to children who are handicapped and receiving funds under EHA-B. The Comprehensive Compliance Review findings indicate that States have neither adopted nor put into use monitoring procedures sufficient to identify deficiencies in the administration of special education programs within a State.

State departments of education reviewed were found to have significant deficiencies in procedures for collecting or analyzing information sufficient to identify a responsible agency's failure to comply with the legal requirements of EHA-B. While many of these deficiencies related to the capacity to monitor local educational agencies, there were also problems with the monitoring of other public agencies (such as a State Department of Human Resources) and private schools responsible for the education of handicapped children.

In addition, States, for the most part, had inadequate policies or procedures for systematically obtaining and reviewing other information relevant to compliance determinations. This included accessing sources such as complaint files, hearing and court files and decisions, and evaluation and performance reports. In some cases, SEAs did not maintain documentation of monitoring and compliance activities in a retrievable or complete manner.

Further, OSEP found that procedures to assure that program deficiencies identified through SEA monitoring are corrected were inadequate. This has resulted in some instances in inadequate implementation of States' existing enforcement authority to the degree necessary to assure that agencies comply with SEA corrective orders and with all applicable legal responsibilities.

SEA corrective orders in some cases were not specific enough to make clear what corrective actions must be taken. Correspondingly, corrective action plans in response to such orders typically contained assurances that a violation would be corrected rather than an explanation of the precise steps needed for correction of the deficiency. A related deficiency found in certain States was that no hearing mechanism existed for LEAs with identified deficiencies to challenge SEAs findings (as required by 34 CFR Section 300.1941(a)). LEAs can request a hearing if a State withholds.

TABLE 36

Frequency of Noncompliance with EHA-B Requirements Identified in 18 Compliance Reviews[a/]

Requirement/Element	Number of States Cited	Percent of States Cited (n=18)
State Educational Agency Monitoring	18	100
LEA Applications	15	83
Complaint Management	12	67
General Supervision	15	83
Due Process and Procedural Safeguards	17	94
Child Count	10	56
Program Evaluation	4	22
Least Restrictive Environment	18	100
Surrogate Parents	8	44
Comprehensive System of Personnel Development (CSPD)	6	33
Administration of Funds	11	61
Confidentiality	4	22
Individualized Education Program	17	94
Student Evaluation	4	22
Private Schools	2	11

[a/] Data are based on draft reports and may be adjusted when the reports become final after OSEP review of State comments on findings. The nature of noncompliance issues in each category varies widely across States. Please refer to the text for explanation.

In an effort to correct the problems found in the area of SEA monitoring, OSEP has required that each of the States involved develop specific procedures for determining whether educational programs under its jurisdiction for children who are handicapped meet State standards as well as EHA-B and EDGAR requirements. This includes, as necessary, written procedures that will result in corrective action plans that have a detailed description of specific actions to be taken, revised monitoring procedures and instruments, written procedures which ensure the collection, analysis and maintenance of relevant information, adequate hearing procedures, and so on. In order to ascertain that the deficiencies in monitoring procedures have been corrected, at appropriate times during FY 87, OSEP will review a sample of monitoring files or reports resulting from a State's revised procedures.

LEA applications. SEAs are responsible for developing procedures that LEAs (and other public agencies in the State that provide educational services to children who are handicapped) must follow when submitting applications for EHA-B funds. In addition, an SEA's procedures must include consideration of any due process hearing decisions adverse to an applicant and any previous actions to withhold funds from an applicant for failing to comply with a program requirement.

The OSEP monitoring teams found a variety of problems in the SEA review and approval process for LEA applications. While the specific problems differed from State to State, every State program monitored during the year had one problem or another with these requirements. Some States had the fundamental problem of not adequately informing eligible applicants of how to obtain EHA-B funds or of not reasonably informing them of all the Federal requirements that must be satisfied before an SEA can approve an application for EHA-B funds.

Some States lacked written procedures or had inadequate written procedures for evaluating LEA applications. Consequently, in certain instances States had no formal criteria for evaluating these applications, nor could they inform LEAs of the criteria that would be applied in the review of the applications. Thus, most review processes lacked one or more of these components: (1) a procedure for determining that each applicant meets each requirement of applicable law; (2) a procedure for considering adverse due process decisions; and (3) a procedure for considering previous decisions to withhold funds for failure to comply with a requirement. As a result, a sampling of LEA applications by the OSEP monitoring teams revealed many applications in which an applicant failed to meet the requirements set forth in the EHA-B regulations.

Correcting these deficiencies required the States to develop procedures or amend current procedures. Further, States were required to review previously approved applications in order to determine which applications were approved although failing to meet Federal requirements and, as necessary, to ask grantees to amend their applications to conform to the requirements as defined in the revised application procedures.

OSEP's monitoring of corrective actions included, (1) reviewing the comprehensiveness and explicitness of the SEA's revised application procedures, making sure that each SEA provided applicants with these revised procedures; and (2) examining a sample of the first group of applications or amended applications approved under an SEA's revised procedures to make sure that these applications meet all of the Federal requirements.

Complaint management. Each SEA is responsible for receiving and resolving any complaint stating that the State or any public agency receiving EHA-B funds is violating a Federal statute or regulation applicable to special education programs in the State. The OSEP monitoring teams found a broad spectrum of ways in which States meet this requirement. Those States monitored during this past year were about evenly divided among those with no identified problems in their complaint management systems, those with minor or easily remedied problems, and those with significant problems.

Among the problems found in some States' complaint management procedures is a difficulty in adhering to the 60-day time limit for investigating and resolving a complaint. In some cases, the State did not inform the complainant of the 60-day rule applicable to the complaint process. (The regulations at 34 CFR Section 76.781(b) do allow for an extension of the time limit based on "exceptional circumstances" but there was no significant documentation that States had defined "exceptional circumstances" and that delays beyond the 60-day limit were actually the result of circumstances that could be called "exceptional.")

Another problem in some States arises from the fact that Federal regulations require that a complaint must be in writing, signed, and contain a statement that a State or subgrantee has violated a statute or regulation and the alleged facts on which the statement is based. Some SEAs did not inform complainants of these requirements and did not act on complaints lacking one of these elements. For example, a complaint that was otherwise sufficient but lacking a signature would not be investigated; the complainant would not be informed that a signature was required and was preventing action on the complaint. Some States also failed to inform complainants of the right to appeal the decision of a State on a complaint to the Secretary of Education.

There were instances where an OSEP monitoring team found that a State lacked written complaint management procedures and, in fact, was doing very little to implement a complaint management system. In those instances OSEP has given the State a brief period of time to remedy the shortcomings and submit documentation. However, in most cases, corrective actions required States to improve the process by more thoroughly informing complainants about the requirements and rights related to a complaint and adhering to the 60-day time limit for investigating and resolving complaints. The effectiveness of these improvements will be measured by reviewing complaint files, reviewing documentation to ascertain that all of the needed information has been transmitted, and determining whether the time requirement was met.

General supervision. Each SEA is responsible for ensuring that all educational programs administered within the State for children with handicaps are under the general supervision of the persons responsible for special education programs in the SEA and meet the education standards established by the SEA. This includes each program administered by any other public agency within the State. Each SEA is further required to ensure that it and all other public agencies within the State receiving EHA-B funds retain for at least 5 years, any record needed to demonstrate that these general supervision requirements are being met.

Most of the States monitored did not fully meet the general supervision requirements. Some SEAs had no policy on retention of records for the requisite five-year period, either for the SEA itself or for the SEA's subgrantees. Some States had particular problems documenting the general supervision of a particular type of institution, such as a special school or intermediate unit, as opposed to an LEA. Some States had particular difficulty in demonstrating that a method exists for disseminating information on special education program requirements and successful practices to other agencies and interested persons.

The corrective actions required by OSEP in response to the deficiencies noted varied depending on the extent of the problem within a State. In some States, it was only necessary to ask for an improved plan for the retention of records and the dissemination of pertinent information related to State and Federal program standards. In other States, the development and implementation of a more elaborate document was necessary, including procedures not only for the retention of records and the dissemination of information, but also for clarifying that the SEA has been given specific authority for general supervision of special education services within the State. This extends to the authority to correct deficiencies and enforce legal obligations in relation to other public agencies in the State.

Due process and procedural safeguards. Each SEA is responsible for ensuring that it and each public agency within the State providing educational services to children with handicaps establish and implement procedural safeguards which meet the requirements of Federal law. Most of the States visited have elaborate systems of procedural safeguards in place in response to the due process requirements of EHA-B. In most States, significant parts of these systems were functioning in a manner consistent with procedural safeguard provisions of EHA-B, but due to the complex nature of these requirements, most States had deficiencies in one or more aspects of their procedures.

For example, some States were deficient in transmitting hearing findings and decisions to the State Advisory Panel as required by EHA-B. Another State failed to adequately demonstrate the impartiality of officials reviewing hearings on appeal. Some others fell short in having time limits which were too short to allow parties to a hearing to adequately exercise their rights (for example, a 10-day time limit for appealing a hearing decision when the reproduction of the hearing record could not be accomplished in much less than 30 days).

In a number of States, there were problems with the adequacy of the notices and other information on due process rights being given to parents. One State could not document that required notices prior to evaluation or placement were always given or that, in cases where there were notices given, they contained the required explanation of all procedural safeguards available to parents.

Other deficiencies found in State procedural safeguards covered a broad range, but no single problem was prevalent. Other problems identified in one or more States included: failing to inform parents of free or low cost legal or other advocacy services; not giving parents the option of having their child present at a hearing or opening the hearing to the public; not assigning surrogate parents in all of the situations where a surrogate parent is called for; not assuring the impartiality of hearing officers, appeals review officer, or surrogate parents; failure to guarantee that during the pendency of any administrative or judicial proceeding, the child involved remains in his or her current educational placement; not requiring the appeals review officer to examine the entire hearing record (limiting the review to the written findings of fact and the decision); or allowing the chief State school officer to make a final determination on an appeal.

In most cases, the corrective action required by OSEP was relatively limited, since it required only one or two discrete modifications of a due process system that was, for the most part, functioning in accordance with EHA-B requirements. As necessary, States were required to modify or revise those parts of the regulations or procedures that were not consistent with EHA-B. They were also asked to document that other agencies in the State providing EHA-B procedural safeguards had been informed of the change. In a few cases, SEAs were asked to develop manuals to assist other agencies in implementing the more major and complicated changes.

Child count. Each State is responsible for reporting to the U.S. Department of Education by the first day of February of each year the number of children with handicaps, ages three through 21, who are receiving special education and related services. This report must be compiled and submitted in accordance with Federal requirements.

In order for a child to be counted by a State

1. the child must have a handicapping condition as defined by EHA-B; and
2. a public agency must be providing the child with special education services.

Without these elements, a child should not be included in a State's child count. In addition, children counted under certain other Federal programs should not also be counted for EHA-B purposes. Consequently, a State must have verification procedures to document that the EHA-B child count is accurate. The

States visited generally appeared to be making a good faith effort to produce accurate child counts. While there was little evidence that there were substantial inaccuracies in the counts being made by the various States, less than a majority of the States monitored had adequate verification procedures to document the accuracy of the annual counts.

In some States, the SEA was assisted in its verification activities by LEAs or independent auditors. In some of those instances, the SEA could not demonstrate that it was aware of the methodology being used by the LEAs or independent auditors to verify the child count data. In other instances, SEAs had established procedures for the verification of child count data, but could not document that these procedures were, in fact, being used by other agencies as required.

OSEP has given assistance to those States with deficiencies in their child count procedures. In a few States where the monitoring results suggested a possibility that a State's child count contained substantial errors (such as counting children for more than one Federal program where this is prohibited or counting children with multiple handicaps under more than one category of handicapping condition), the State has been asked to do more than bring child count and verification procedures up to Federal standards. In those States, the new procedures will be applied retroactively to the State's three most recent child counts. If any instances of erroneous receipt of EHA-B funds are disclosed, the SEA involved will be asked to remit the overpayment to the U.S. Department of Education.

Program evaluation. Each State is responsible for the adoption and use of procedures to evaluate, annually, the effectiveness of programs in meeting the needs of handicapped children, including the evaluation of the individualized education programs (IEPs) developed for each child. The monitoring teams did not find significant deficiencies in this area in most of the States visited.

A few States did have problems that required corrective action. For example, deficiencies included: no written procedures to evaluate the effectiveness of programs; no assignment of responsibility for the evaluation activities to any office or individual; no use of monitoring information as a data source for evaluation activities; no stated basis for selecting the numbers and types of programs to be evaluated; and no exchange of the information with affected agencies, State officials, or affected parents in order to facilitate the improvement of programs.

Least restrictive environment. Each State is responsible for ensuring that each public agency serving students who are handicapped establishes and implements procedures that meet the Federal requirements for educating those students in the least restrictive environment (LRE). There are many aspects to LRE. A primary requirement is to educate, to the maximum extent appropriate, children who are handicapped with children who are not handicapped. This means that the removal of children who are handicapped from the regular educational environment occurs only when the nature of a child's handicap is such that education in regular classrooms (with supporting services) cannot be accomplished.

Based on site visits conducted by OSEP monitoring teams, virtually every State had significant problems in meeting its LRE responsibilities. In some States, problems are Statewide and evidence leads to the conclusion that States have neither established nor implemented procedures to ensure the removal of children who are handicapped from the regular educational environment is justified.

These States have not developed policies and procedures setting forth standards public agencies are to use to assure that, to the maximum extent appropriate, children who are handicapped are educated with children who are not handicapped. As a result, there are no corresponding standards that public agencies are to use to document and justify placements in restrictive educational environments. Also, LEA applications are approved that do not indicate that removal of students who are handicapped from regular to segregated educational settings will be documented and justified.

Reviews of some individual student records in these States revealed a substantial lack of information that LRE is considered before a placement is made in a more restrictive setting. To the contrary, it is possible to conclude that some placements are made on the basis of the handicapping condition or for administrative convenience. In some cases, it appears that a placement has been determined prior to the development of a complete individualized education program (IEP).

Each public agency in a State providing educational services to children who are handicapped is required by EHA-B regulations to make available a continuum of alternative placements to meet the individual needs of these children. Because of deficiencies such as those cited in the previous paragraphs, monitoring teams found that in some States, a child's placement depended on what LEA was making the placement. Where children with a certain handicapping condition in one LEA might be placed in a variety of settings in accordance with individual assessments, children in another LEA might automatically be assigned to one placement in which all children with that handicapping condition in that LEA are assigned.

An important corollary of the LRE requirement is that children who are handicapped should participate with children who are not handicapped in nonacademic and extracurricular services and activities, to the maximum extent appropriate to a child's needs. Given the other findings made in regard to LRE, it is not surprising that many cases were also found where children were placed in more restrictive settings with little or no concern given to the section of regulations dealing with nonacademic and extracurricular activities.

While the extent of LRE problems differed from State to State (for example, in one State the problems might be across the entire State, while in another State some LEAs might be making a good effort in fulfilling the LRE requirements in sharp contrast to other LEAs in the same State), the magnitude of the deficiencies was substantial in many cases and neither as quickly nor or as easily remedied as most of the deficiencies discussed in other topic areas included in this summary of the OSEP monitoring findings. Consequently, the corrective actions initiated by OSEP in response to these LRE findings anticipated that States would need to invest considerable effort over a longer period of time than would be necessary for most of the corrective actions required in other areas.

Not only are States being required to develop detailed policies and procedures for public agencies to implement the LRE requirements, but they are being asked to take the steps necessary to ensure that all other affected public agencies understand these requirements. For some of these other agencies, this will require significant changes in present practices to eliminate deficiencies such as

- placing children in restrictive settings without documentation or justification;
- making placement decisions on other than an individualized basis after completing a valid IEP;
- making placement decisions on:
    - a categorical basis,
    - the basis of available service delivery systems,
    - the basis of available related services,
    - the basis of available space at a particular facility, and
    - other bases not giving consideration to the individual needs of a child and the LRE requirements;
- failure to provide the continuum of alternative placements that provides for enough options to meet the LRE requirement; and
- failure to include in applications for EHA-B funds the policies and procedures to be employed to provide LRE to each child.

OSEP will not only be reviewing each State's amended LRE policies and procedures, but also the materials to be used for providing technical assistance to other agencies to inform appropriate personnel how to implement LRE responsibilities. Each State will also be required to submit a written assurance that all appropriate personnel within that State have received the required information.

As a result of this process, OSEP anticipates that a significant number of IEPs will be revised and that changes in placement to less restrictive settings will result. OSEP will require that the States involved submit reports delineating these activities, broken down by category of handicapping condition, type of placement, age of the child, and the public agency responsible. By reviewing this information OSEP should be able to determine if the corrective actions have been effective and what, if any, additional action is required.

Surrogate parents. EHA-B regulations require that a public agency responsible for the education of a handicapped child assign an individual to act as a surrogate for the parents of the child when needed. A surrogate parent is needed when the child's parent cannot be identified; where the public agency, after reasonable efforts, cannot discover the whereabouts of a parent; or where the child is a ward of the State. A surrogate parent must have no interest that conflicts with the child's interest and have the knowledge and skills to adequately represent the child.

In a substantial number of the States monitored, no significant deficiencies were found in the system of assigning surrogaate parents to those children needing one. In those States where problems were discovered in this area, the most common problem was the failure to assure that individuals selected as surrogate parents had no conflict of interest and were not employees of any public agency which was involved in the education or care of the child which they represent. In one instance, it was also found that a State, although having a policy requiring a surrogate parent to each child that needs one, had no procedures for determining whether a surrogate parent is needed, in addition to lacking a method for selecting surrogate parents in accordance with the applicable criteria.

Except in the one case noted above, OSEP's corrective actions have been limited to requiring a few States to amend surrogate parent regulations to prevent the appointment of individuals proscribed by Federal regulations. Where more serious problems were found, the SEAs involved were required to adopt the needed written procedures, submit them to OSEP for approval, disseminate the approved procedures to each public agency in the State, and provide technical assistance to the other public agencies on how to implement the procedures. Finally, the SEA will submit a written assurance that each child needing a surrogate parent has had one appointed who meets the Federal requirements for a surrogate parent.

Comprehensive system of personnel development. Each SEA is responsible for conducting an annual needs assessment to determine whether a sufficient number of qualified personnel are available in the State. Based on the results of the needs assessment, the SEA is expected to initiate inservice personnel development programs.

Given the growth of special education services since the passage of EHA-B and the nationwide shortage of trained special education personnel, the personnel development system is a central enterprise for most SEAs. OSEP monitoring teams found that most SEAs were making a major effort in the area of personnel development and having considerable success in meeting the challenge of developing and upgrading the skills of persons providing special education and related services to handicapped children.

Considering the substantial need to train special education service delivery personnel in most States, it would not be reasonable to expect that any State would have a comprehensive system for personnel development that could not be improved. However, it was encouraging that many States appear to be doing a sufficiently credible job that major corrective action was not required in those States as a result of monitoring visits.

There were some examples where a State did not update its needs assessment annually as required. It was, therefore, not clear if those SEAs were directing their training efforts toward the areas that were currently of greatest need. Other deficiencies encountered included instances where inservice training excluded certain groups (e.g., non-teaching professionals and parents), even though the needs assessment indicated that these groups were often the most in need of training; where support for inservice activities had been recognizably limited to a level that could not result in a sufficient level of training taking place; where there was a lack of appropriate incentives to ensure participation by those in need of training; and, where there were no procedures for evaluating the effectiveness of the inservice training in meeting the State's personnel development objectives.

It was also found that some States had no mechanism for identifying promising educational practices and materials. Moreover, there was no mechanism to acquire and disseminate innovative practices and materials throughout the State. Some States had no procedure that other public agencies could use to request technical assistance.

While the degree of progress in implementing the comprehensive system of personnel development has been encouraging in some States, OSEP did require corrective action in a number of States where substantial deficiencies were found. Requiring States to be more assiduous in completing the annual needs assessment was the preliminary step. Other requests for corrective action in this area were specific to the particular problems uncovered in a given State. While many of the needed improvements can be accomplished administratively, by amending policies and procedures and implementing those modifications, the effectiveness of these changes can only be measured over one or two school years as these changes affect the inservice training activities. Therefore, OSEP has allowed up to a year for some States to submit a report documenting what changes have resulted from implementation of the new policies and procedures.

Administration of Funds. Each State has certain responsibilities in the handling of EHA-B funds. In general, the requirements are aimed at ensuring that EHA-B funds are used only for educational programs serving children who are handicapped. This includes procedures to document that each recipient of EHA-B funds maintains records that show the funds received, how the funds are used, the total costs of the funded program, and the share of those costs funded from other sources. (These records are retained by each recipient for a period of 5 years.) The SEA is also responsible for approving, on an annual basis, all requests made by LEAs for use of an indirect cost rate in accordance with applicable cost accounting procedures.

On the basis of the States monitored, it appears that most SEAs have in place the necessary accounting procedures to document that they are using EHA-B funds properly. There are some problems in some States, but most of these are of a technical nature. For example, in some States, gifted and talented programs are administered by the same office that administers programs for children who are handicapped. While all of these children are "special" under State definitions, some are not "special" under the eligibility definitions of EHA-B. In this type of situation, there can be some technical problems in ensuring that EHA-B resources are only used in EHA-B related activities.

Similarly, in situations where there are State, local and other Federal funding sources as well as EHA-B monies, some SEAs have had problems clearly documenting that there is no commingling of EHA-B funds with funds from any other source. There have also been instances where SEAs have had problems with computing certain costs under EHA-B, such as the "excess costs." This is in response to the regulation that limits LEAs to only using EHA-B funds for the excess costs of providing special education and related services for handicapped children. Additionally, there are certain categories of expenditures that are permissible under EHA-B, but require prior Federal approval. (Examples are construction costs and the purchase of some types of equipment.) There have been instances where the necessary prior approval was not obtained.

It also appears that in some States, SEAs have routinely approved indirect cost rates for LEAs without having a means of determining that the rates requested are reasonable. SEAs are responsible for approving, as part of the LEA application process, indirect cost rates. Some States have approved LEA indirect cost rates without having essential policies and procedures for determining that the requested rates are based on fact and can be documented as reasonable.

While most of the deficiencies discussed are susceptible to corrective action and technical assistance that can be effective within the 1986-87 school year, in one State, the monitoring team found deficiencies of such a pervasive nature that OSEP's findings have been referred to the Department's Office of the Inspector General for further investigation and appropriate corrective actions, as may be warranted.

Confidentiality. Each SEA is responsible for ensuring that public agencies provide certain rights to parents with respect to an agency's handling of a child's education records. This includes giving notice to parents of the nature and extent of such records. It also includes a parent's access rights to inspect and review education records relating specifically to their children. The regulations also provide a hearing mechanism for a parent to contend that information in education records is inaccurate, misleading, or otherwise in violation of the privacy or other rights of a child. The regulations also include a system of safeguards requiring that each public agency protect the confidentiality of personally identifiable information.

The OSEP monitoring teams did not find major deficiencies in the way the monitored States are meeting the confidentiality requirements. When problems were encountered they generally fell into two categories: notice requirements and training for personnel handling education records.

The regulations do not require that all agency personnel be skilled in the confidentiality requirements. But they do require that an individual at each agency be designated as responsible for the implementation of these requirements and that those persons collecting or using personally identifiable information receive training as needed. Some States need to expand training activities to make certain that adequate training is being given to all persons who collect or use these education records.

Public agencies have two kinds of responsibilities in the area of notice. One is a general responsibility to inform parents (and the public) of the kinds and the extent of records maintained by the agency. The other is the more specific responsibility of informing parents of their individual rights such as access to records, the right to a hearing regarding the content of the records, the right to give or withhold consent in regard to certain uses of the records, and others. While all States give both kinds of notice to some extent, the form content, and manner of distribution of both kinds of notice have been modified in some States as a result of the OSEP monitoring findings. For the most part, this required modest changes in forms and procedures that were already in use.

OSEP State plan and compliance monitoring procedures are continuously being reviewed and refined based on experience, and systematic feedback obtained from SEAs, LEAs, parents, and professional and advocate organizations. During the 1985-86 school year, OSEP has initiated technical assistance through the Regional Resource Center program to encourage States to review, refine, and when necessary, develop operational standards for assessing and assuring the implementation of EHA-B requirements. OSEP's program review activities have progressed from one of intermittent to continuous oversight. The challenge remaining is to refine the procedures to be efficient, timely and effective for improving the education of handicapped children.

State Educational Agency Monitoring of the Implementation of EHA-B

Under Sections 612(6) and 613(a)(11) of EHA-B, each State educational agency is responsible for assuring that the provisions of EHA are implemented, through monitoring of all educational programs within the State, including those administered by any other State or local agency. This responsibility is designed to ensure that all program providers comply with all Federal and State requirements which set forth and guarantee the provision of a free appropriate public education to all handicapped children and youth. Further, the statute requires the Federal government to ensure that SEAs are properly carrying out these monitoring responsibilities.

In fulfilling these obligations, Federal statutes and regulations require that each SEA carry out a minimum of four administrative responsibilities, as follows:

- Adoption and use of policies and procedures to exercise general supervision over all educational programs for handicapped children within the State;
- Adoption and use of a method to continuously collect and analyze information sufficient to determine compliance of subgrantees and other agencies providing services to handicapped children within the State with applicable State and Federal program requirements;
- Adoption and use of a method by which the SEA formally directs that each deficiency identified in program operations be corrected; and
- Adoption and use of a method by which the SEA enforces State and Federal legal obligations by imposing appropriate sanctions when a public agency fails or refuses to correct a deficiency.

Data from recent studies and OSEP monitoring activities indicate that SEAs have increased their capacity and improved their ability to implement these requirements, although specific aspects of these four areas of responsibility continue to be problematic for many SEAs. The challenges confronting States and the improvements they have made to fulfill their legal obligations within these four areas are described in the following three sections. The correction of deficiencies and enforcement of sanctions are discussed in a single section as they are closely linked in the monitoring process.

General Supervision

The results of site visits to 18 States conducted by OSEP indicate that States continue to be challenged to fully implement the general supervision requirements of EHA. While the SEP site visit findings show that States are experiencing difficulties with almost 20 different areas of the law, the general supervision requirements were found to pose major problems in all but two of the States visited.

OSEP findings of noncompliance most often cited a failure on the part of the SEA to ensure that the recipients of EHA-B funds retain the records needed to demonstrate compliance with applicable program and administrative requirements, insufficient procedures for ensuring that the SEA or any other responsible agency that administers special education programs has an appropriate method for coordinating the administration of special education programs and projects within its jurisdiction, and a lack of appropriate methods for disseminating to responsible agencies information on special education program requirements and successful practices.

In previous years, a finding of noncompliance in the area of general supervision usually resulted from the SEA lacking adequate authority over educational programs for handicapped children administered by other public agencies, by statutes or agreement, or from the SEA failing to exercise its authority properly. The most recent OSEP site visit results indicate that only one State visited is still experiencing major problems with this requirement because the State Board regulations do not specify that the SEA has authority to correct deficiencies or enforce legal obligations in programs operated by other State agencies. However three States were cited for a failure to exercise general supervision over a particular school operated by another State agency, and one State was cited for not exercising sufficient general supervisory authority over all public agencies providing special education in the State.

A study on effective State monitoring policies conducted by the Center for the Study of Social Policy (1983) is consistent with the findings of OSEP related to SEA implementation of the general supervision requirements. However, SEAs have directed significant attention to LEA monitoring as opposed to monitoring programs operated by other State agencies. This reflects the realization and resultant prioritization that LEA programs serve the majority of children with handicapping conditions in a State.

A more recent survey of 16 States conducted by NASDSE (1986) confirms the priority placed by SEAs on monitoring of local education agencies. The NASDSE survey found, however, that States report little procedural difficulty in monitoring other agencies that provide special education and related services in their State. Typically SEAs report that monitoring these agencies is premised on the use of the same procedures, manuals and follow-up activities that are employed to monitor LEA programs. The Center for the Study of Social Policy (1983) reported additional approaches to monitoring other State agencies, including written interagency agreements, and integration of the monitoring requirements of the SEA with the licensure and certification requirements of other State agencies.

While these data indicate that States have made progress in their efforts to comply with the general supervision requirements, it is clear from findings of OSEP monitoring visits that States are still experiencing serious difficulties in fully meeting their responsibilities in this area. Data compiled by NASDSE suggests that recent SEA efforts to improve their monitoring activities have been concentrated on the other areas of administrative responsibility which were also found by OSEP to require improvement in many States -- continuously collecting and analyzing information, and follow-up and enforcement to ensure that deficiencies are corrected.

Continuously Collecting and Analyzing Information

Findings from OSEP site visits to States indicate that the vast majority of Federal citations of noncompliance in the area of SEA monitoring resulted from deficiencies in procedures for continuously collecting or analyzing information sufficient to determine if LEAs were in compliance with specific legal requirements of EHA-B. Common deficiencies in these procedures were related to incomplete review of requirements for evaluation and placement, residential placements, program options and confidentiality of student records. States were also cited frequently for failure to have procedures for collecting and reviewing other information relevant to compliance determinations, such as complaint files, hearing and court files and decisions, and evaluations and performance reports.

One reason that States continue to be cited for deficiencies in their procedures for collecting and analyzing compliance data is that, as reported both by NASDSE and by the Center for the Study of Social Policy, the monitoring procedures that most SEAs have implemented to carry out their administrative responsibilities are based on a cyclical process where LEAs are subject to a comprehensive compliance review by the SEA only at specified intervals. The review is focused on an on-site visit which is typically completed at either three-year or five-year intervals. Both OSEP site visits and the NASDSE survey found that for most States reviewed, in years when LEAs are not subject to the on-site review, only limited compliance-related data are collected by the SEAs. A review of monitoring procedures conducted by the Mid-South Regional Resource Center in July 1986 found similar cyclical approaches used in each of the nine States in the Mid-South region.

The cyclical process being used by SEAs to monitor LEAs for compliance as found in the NASDSE study can be characterized into three phases -- (1) Data Collection and Review; (2) On-Site Validation; and (3) Reporting and Follow-up -- each of which is described below.

- Phase 1: Data Collection and Review - This component of the compliance review is designed to obtain and review relevant information for determining the consistency of local policies and procedures with Federal and State statutes and regulations. The implementation of these policies and procedures are verified during the on-site review conducted during Phase 2. Activities completed during this phase are primarily in preparation for the on-site monitoring visit and include obtaining and reviewing district policies and analysis of performance data. In addition, logistical procedures such as building and pupil sampling for purposes of verification are undertaken.

- Phase 2: On-Site Validation Reviews - The primary purpose of on-site monitoring is to validate the implementation of the plans, policies and procedures documented during Phase 1 and to ensure compliance with areas not readily verifiable through document review and data reporting. This phase typically includes visits to schools and classrooms to observe all components of the program, such as instruction, related services, staffing patterns and teacher certification/qualifications, program supervision, physical plant, and availability of inservice training. Activities during this phase also include record review for a sample of students and review of a sample of IEPs, as well as interviews with various personnel, such as administrators, support personnel, teachers, students, and parents, to verify the provision of services and to validate that procedures are being implemented as documented.

- Phase 3: Reporting and Follow-up - The final phase of the on-site compliance review process is designed to provide agencies with feedback regarding their compliance status, to assist with development and implementation of plans for corrective action and in some States, to provide recommendations on program areas which may need improvement even though they are in compliance with Federal and State statutes and regulations. This component generally includes preparation of a written report that contains findings from the on-site visit, and follow-up to ensure that required actions are implemented by the LEAs. The content of the written report is similar among States and typically includes commendations, areas of noncompliance, and a plan for corrective action and/or a program improvement plan, as well as timelines for implementing required and recommended changes. Once the plans of action are completed and appropriate documentation of implementation of the corrective actions have been received, the SEA sends a letter indicating compliance to the local agency.

Results of OSEP site visits have indicated that this cyclical process used by States does not always result in comprehensive monitoring of all requirements to fully meet their obligation of continuously collecting and analyzing compliance information. NASDSE reported, however, that as States continue to improve their systems of compliance monitoring to meet their administrative responsibilities, they are moving towards the development of improved processes which allow SEA staff to monitor agencies on a more continuous basis than the on-site review interval would otherwise allow. For example, several of the States studied by NASDSE currently encourage or require LEAs to conduct a self-evaluation, although there is substantial variation among States in the use of self-evaluation procedures. Most States employ self-evaluation as a preparatory process only prior to the SEA on-site visit, but NASDSE found that many SEAs have begun to require annual self-assessments by LEAs in an attempt to gather compliance information on a more continuous basis. The self-evaluation instrument is primarily a checklist of policies and procedures and may include examples of the appropriate types of documentation required to demonstrate compliance. The self-evaluations are generally designed to assist LEAs in identifying program areas in need of improvement and to assist agencies focus requests for technical assistance.

Another activity reported by NASDSE as recently implemented by States to provide more continuous oversight is a strategy used in Ohio and Illinois, which focuses on review of policies, procedures and forms to determine that they are complete and are in compliance with State and Federal laws and regulations. In Illinois written policies and procedures for screening, referral, determining appropriateness of referral, LRE, conducting evaluations and reevaluations, and placing students in special education classes are submitted to the SEA along with forms in several areas, including referral, parent/guardian notification, multidisciplinary conferences, reports, documentation of parent contacts and IEPs. A report of findings is developed by the SEA including corrective action needed, and the LEA must respond to the report of findings with a written plan of action specifying how each area has been or will be corrected and timelines for each corrective action. This procedure allows the SEA to oversee many components of an agency's special education program without having to conduct an on-site visit.

One of the more sophisticated "off-sight" monitoring procedures reported by NASDSE is the Special Education Information System (SPEDIS) developed by the New Hampshire Department of Education. SPEDIS is a student-level data base which contains information about individual students and their programs which is entered by each school district responsible for providing special education. The SPEDIS system is designed to analyze the data, reject inaccurate or inappropriate entries, and flag data which are old or in noncompliance with State or Federal regulations. On a regular basis, SPEDIS is used to ensure that

- special education is provided only for children within the State-mandated age range (3-21);
- evaluation data are consistent with criteria associated with the handicapping condition and that tests were administered by qualified examiners;
- evaluation data are not more than three years old;
- special Education Evaluation/Placement Team meetings are held at least annually;
- IEP information is complete; and
- discharge information is available for transition planning.

SPEDIS data are updated continuously throughout the year by each agency providing special education and related services to handicapped children. SEA staff reviews SPEDIS data for all agencies on an annual basis in areas such as placement, dates of reevaluations, and number of hours in each program placement. In addition, prior to on-site visits, extensive reports are prepared using SPEDIS data for review by the on-site monitoring team.

NASDSE also found that several States work closely with their complaint management unit within the SEA, which makes available to monitoring staff, on a regular basis, data such as parent complaints, numbers and topics of due process hearings, OCR findings, or referrals from other agencies. Review of complaint data occasionally leads to the SEA conducting "issue specific" or "selective" reviews of local and other agencies. These reviews are indepth analyses of specific targeted issues in particular agencies which have come to the attention of the SEA through the compliant management system. Agencies can also be selected for targeted reviews through data from other sources, such as special studies, fiscal data, or other statistical data collected by the SEA on an annual basis. Selective reviews are typically conducted through on-site visits by SEA staff to determine compliance in the specific area with guidelines, rules and regulations, and law. As with the comprehensive on-site compliance reviews, reports of findings are developed and technical assistance is provided to assist the agency implementing any required corrective actions.

These processes developed by the States provide SEA staff with more comprehensive and continuous systems for monitoring the implementation of Federal and State rules and regulations than they have had before. As a result, SEA staff reported to NASDSE that as they continue to develop and refine their systems of compliance review they become more efficient and thorough in their monitoring procedures. In addition, a side effect of the monitoring process results in SEAs identifying innovative and exemplary programs which can be disseminated to other agencies.

Correction of Deficiencies and Enforcement of Sanctions

SEA staff in one State studied by NASDSE (1986) reported that as their monitoring process has evolved they have found an increase in the number of findings of noncompliance which can be attributed directly to increased comprehensiveness of their monitoring process, not to an increase in the number of infractions on the part of the agencies. Other States reported that improvement in their systems had enabled them to evaluate findings of noncompliance on a more systematic basis, and consequently they have the ability to note trends in compliance and noncompliance and to identify problem areas which may call for targeted technical assistance throughout the State.

NASDSE reviewed summaries of findings prepared by 10 States upon completion of comprehensive compliance reviews conducted during 1985 and 1986. The findings indicate that most LEAs are not experiencing difficulty with implementation of the vast majority of Federal and State regulations. For example, in a review of 62 LEAs in Connecticut during 1985, only 3 percent of the possible citations were found to be out of compliance, and three of the LEAs visited had almost 60 percent of all the findings of noncompliance. Similarly, 161 compliance reviews conducted by the California SEA in 1985 resulted in only 5 percent of the possible citations of noncompliance and Oregon noted that 36 percent of the 116 local districts they monitored during 1985 had no findings of noncompliance at the time of the monitoring visit.

Across States reviewed by NASDSE, areas with which LEAs were found to have little difficulty with implementation of Federal laws and regulations included child identification and location, right to a free appropriate public education, screening and referral of students, comprehensive system of personnel development, and provision of services within the least restrictive environment. In addition, few States reported that LEAs had difficulty meeting the requirements related to confidentiality, access to records, and the provision of appropriate services.

Among the typical SEA findings of noncompliance, some of which were State-specific, such as class size, NASDSE noted that three areas were prevalent across the 10 States reviewed--the evaluation process, the content and development of IEPs, and parental notification. In addition, six States noted that LEAs were having difficulties associated with staff shortages, particularly specialized staff, such as occupational and physical therapists, bilingual special education teachers, and bilingual evaluation staff.

NASDSE reported that States were not always specific in their summaries of findings with respect to citations for noncompliance, but in those States that did provide detailed reasons for the citations, findings of noncompliance were not for the most part related to a failure to provide services, but rather to inadequate written procedures and insufficient documentation. For example, problems identified in the area of parental notification included not maintaining documentation that parents had been contacted with information on participation in IEP meetings. Problems noted in the area of IEPs included insufficient specification of annual goals, short-term instructional objectives and performance objectives, or incomplete delineation of specific programs and services to be provided to the student, including related services. Three States also noted that LEAs were having difficulty meeting the requirement to review IEPs annually, and three States cited their LEAs consistently for failure to meet the 3-year reevaluation timelines.

The most serious shortcomings noted by NASDSE were in the area of evaluation, where all States cited their LEAs for deficiencies in some part of the evaluation process. Most notably, close to half the States reported that written comprehensive evaluation reports were not complete or did not clearly document the rationale for determining eligibility for specific services. Another common finding was that a multidisciplinary team was not always used to determine a student's eligibility for special education services. One State noted that this finding was often due to the fact that the speech therapists could not provide evidence that they had assistance from other evaluation staff in establishing the eligibility of students with language and communication disorders.

While these findings suggest that SEA monitoring activities are effective in identifying deficiencies in local program operations, over half the States visited by OSEP were found to have significant shortcomings in their procedures to assure that such program deficiencies are corrected. This has consequently resulted in inadequate implementation of States' existing enforcement authority to the degree necessary to assure that agencies comply with SEA corrective orders and with all applicable legal responsibilities.

The NASDSE survey found, however, that States have made changes to their reporting and follow-up procedures in an effort to more closely monitor LEA implementation of corrective actions. The NASDSE survey indicated that in most States studied, upon completion of the on-site compliance review, a draft report of findings is prepared by the SEA monitoring team leader, including recommended plans of corrective action. Different approaches are used for development of the final report, which includes timelines and the actual corrective actions to be implemented by the LEAs, but typically States communicate with the locals through written documents and letters with the SEA taking the lead role in development of the plans for corrective action. In Ohio, however, the core monitoring team returns to the site with the report of findings to engage in a cooperative process of negotiation of corrective actions with the local administrators. The on-site follow-up meeting for negotiation purposes is a recent addition to Ohio's compliance review system. SEA personnel responded to NASDSE interviewers that they find the face-to-face communication to be much more effective than written correspondence. Local administrators are reported to be more cooperative when they are personally involved in the development of the corrective action plan and seem to have a greater interest in ensuring that the plan is implemented in a timely fashion.

In Illinois, the NASDSE survey indicates that local agencies play an extensive role in developing a plan for corrective action, as they are required to formulate a response to the SEA's report of findings, and in California, the local agency takes the lead role. NASDSE also reported on another feature of California's follow-up procedures which have been implemented in an attempt to ensure that LEAs are correcting identified deficiencies--an automated compliance tracking system which is used to catalogue each finding of noncompliance for a LEA. When a notice of implementation of corrective action is filed by the LEA the information is noted in the system. The data base is used to identify agencies which have not implemented corrective actions within the required timelines and generally keeps track of agencies' compliance status and progress being made toward compliance.

Another activity used by States to ensure that deficiencies are corrected is periodic progress reviews to check on the implementation of required actions. NASDSE reported that to improve their follow-up process, States have developed formal follow-up procedures for agencies that have not adequately responded to findings from a compliance review, or for agencies with severe compliance problems. The follow-up review entails revisiting the agency and may also include provision of additional technical assistance if required.

States also noted the availability of sanctions to ensure compliance, but most reported that they preferred not to use this approach as it seemed to be somewhat self-defeating. NASDSE noted that most SEA staff believe the most successful technique for achieving compliance is the provision of technical assistance which is typically requested by the local agencies in response to the report of findings. Nevertheless, one State reported that withholding of funds was recently required to persuade one LEA to implement corrective actions and another State studied by NASDSE reported that occasionally a slowdown of funding was employed as a sanction when absolutely necessary.

It is evident that SEAs are assessing, and committed to assuring, that programs under their governance provide a free appropriate public education to all handicapped children consistent with Federal and State statutes and regulations. The enhanced management information systems which are permitting more continuous screening, the more thorough review of all requirements and strengthened follow-up procedures, reflect the continuing growth in SEA capacity to continuously assess and assure the implementation of EHA-B requirements.

Program Evaluation

The first part of this chapter has described Federal and State efforts to assess and assure the implementation of EHA-B requirements. The remainder of this chapter describes Federal and State program evaluation activities designed to assess and assure the effectiveness and impact of the policies, procedures and practices being implemented. The Federal program evaluation activities are described and findings of completed studies summarized. Further, a selected sample of State and local program evaluation studies are presented as representative of the efforts States and local educational agencies are making and knowledge they are contributing to improving the quality of educational opportunities provided to handicapped children and youth.

Federal Evaluation Efforts

The principal evaluation activities being conducted at the Federal level relate to specific legislative mandates that are prescribed in Section 618 of EHA-B. A summary of these evaluation studies is presented below.

Mandated Studies

The special studies required by Section 618 of the EHA represent topics and concerns where nationally representative information is needed by Congress and the U.S. Department of Education to determine the nature and variability of efforts to implement the Act. The following three studies currently are being supported under this section.

Longitudinal study of secondary and postsecondary handicapped students. P.L. 98-199 directed the Secretary of Education to conduct a longitudinal study of a sample of handicapped students as part of the mandated evaluation effort to assess the impact of EHA-B. The study will focus on the educational, vocational, and independent living status and experiences of secondary students while in special education and their transitional status and progress after graduating or otherwise leaving secondary school.

Five major research questions will guide the study's collection of descriptive and explanatory data as well as the data analysis efforts:

Descriptive Issues

1. What are the personal and family characteristics of secondary-age handicapped youth?

2. What status do handicapped youth attain while in school and afterward in education, employment, and independent-living domains?

3. What education, employment, and independent-living services do handicapped youth receive while in school and afterward?

Explanatory Issues

1. What explains the patterns of services that handicapped youth receive?

2. What background and contextual variables, services, experiences, or prior attainments are related to youths' educational, employment, and independent living outcomes?

Data will be obtained from a planned sample of 8,000 parents of handicapped students from 50 States and from approximately 300 local educational agencies and from the youths themselves, as well as from school records, school district administrators, and service providers for students aged 14 through 26.

Due to the complexity of sampling, measurement, data collection, and analysis issues related to designing and implementing a five-year study, a planning contract was awarded to SRI International in September 1984 and completed in October, 1986. A Request for Proposal to implement the longitudinal study design was announced in October, 1986 and is planned for award by January, 1987. The first wave of data collection is planned for the Spring of 1987.

Survey of Expenditures for Special Education and Related Services. OSEP has contracted with Decision Resources Corporation to undertake a national survey to obtain comparable expenditure data from a nationally representative sample of local educational agencies for all handicapping conditions. The data is to be obtained from a sample of 60 school districts in 18 States. To overcome previous interpretive limitations of expenditure studies, DRC is using an "ingredients approach" to determine per pupil costs for special education. In such an approach, costs for each service will be determined and then aggregated in order to provide a range of expenditures by handicapping condition and age.

The DRC study has been designed to answer three questions, which are described below. The underlying objective is to provide estimates and ranges of expenditures and services nationally, and to provide an explanation for the variations in ranges and service levels. The study's focus on addressing the range of expenditures and explaining variation is a major advancement in understanding national estimates of special educational expenditure data and being able to explain the variation within and between handicapping conditions as well as State and local educational agencies.

The first question--how much does it cost to educate handicapped children?--will be addressed by using the following subquestions:

- What is the average and range of per pupil expenditures for special education instructional programs and related services for all handicapped students?
- What is the average and range of per pupil expenditures for each category and age group of handicapped students?
- What is the national total and range of district costs for special education instructional programs and related services?
- What factors contribute to the cost variations?

The second question to be answered--how do local educational agencies finance these costs and what is the contribution of Federal funds?--will be addressed in two subquestions:

- What is the proportion of all special education and related service expenditures for each of the major Federal education programs for the handicapped, and State and local funds?
- How do districts allocate "external" funding sources among special education programs and related services?

The third question to be examined--what levels of special education programs and related services are provided and to which handicapped students?--will be addressed in two subquestions:

- What is the proportion of children in each Federally-defined handicapping category and age/grade group receiving different special education programs and related services?

- What are the patterns of special education programs and related services delivered to different groups of children?

The DRC study completed data collection during the Spring of 1986. Analysis and reporting of the findings will begin during 1987 and continue during 1988. Future annual reports will detail the DRC study methodology, procedures for analysis, and findings.

Study of Programs of Instruction in Day and Residential Facilities. Section 618(f)(2)(E) of the EHA requires that the annual report to Congress on the implementation of the Act include "an analysis and evaluation of the effectiveness of procedures undertaken by each State educational agency, local educational agency, and intermediate educational unit...to improve programs of instruction for handicapped children and youth in day or residential facilities." To address this requirement, OSEP is conducting a 36-month study which will focus on the children who are served by facilities (in either day or residential programs) that are primarily or exclusively for handicapped students. While this group of children represents only a relatively small proportion of all handicapped children identified within the United States, they are a particularly important group for several reasons. First, the students are generally more severely handicapped than handicapped children who live at home and who attend regular, rather than separate or special schools. Second, considerable variation exists among States and across age and handicap groups in terms of the proportion of children in separate day programs or residential facilities.

A number of questions regarding this population remain unanswered:

- What are the characteristics of children served in separate day and residential facilities?

- What are the nature and amount of educational and related services received by these children, and the quality of services, staff, and facilities?

- What opportunities for integration exist within separate facilities, and how do children move in and out of such facilities?

By surveying State educational agencies and a sample of separate facilities, and by comparing data obtained through this study to that obtained by the Office of Civil Rights (OCR) in a study conducted during the 1978-79 school year, improvements and changes in programs and services in day and residential facilities will be documented. Initial data will be available for reporting in the Eleventh Annual Report to Congress.

The State Educational Agency/Federal Evaluation Studies Program

The Congressional intent in authorizing legislation for the creation of the State Educational Agency/Federal Evaluation Studies Program in 1983 was that a State/Federal cooperative evaluation effort would mutually benefit the special education program at Federal, State and local levels. For mutual benefit to exist, the State evaluations would have to consider both the Federal need for intense evaluation that explains a thorough understanding of relationships and variability, and the State need for evaluation of program effects that are compatible with the State's publicly-adopted agenda and policies. Through the passage of the Education of the Handicapped Act Amendments of 1983, Congress authorized the Secretary of Education to enter into cooperative agreements with State educational agencies to assess the impact and effectiveness of programs for handicapped students under Section 618(d) of the Act.

The need for responsive evaluation that is capable of reacting to a State's publicly-adopted program agenda, or to the State legislature, as well as having national relevance is demonstrated by the impetus within States to evaluate their own programs. Connecticut undertook the FY 84 study of Critical Variables that Affect the Placement of Emotionally Maladjusted Students because of the escalating costs of private placement, reliance on what some regard as a more restrictive education for emotionally maladjusted students, and increasing litigation.

In New York, the State Board of Regents has prepared legislative action that would provide State aid to school districts to provide direct support services for nonhandicapped students in need of such services (NYS Education Department, 1985). The findings from the FY 85 New York study, Evaluation of the Effects of New York State's Instructional Program Options, Support Services and Procedures Used Prior to Referral for Special Education and Upon Declassification from Special Education is expected to contribute to deliberations on such legislative action.

In 1985, the North Carolina State Legislature revised State regulations for more effectively identifying children as having specific learning disabilities and behavioral/emotional disorders. The data collected and analyzed through North Carolina's FY 85 project will provide answers to questions of effectiveness of their pre-referral and intervention model for implementing these new regulations.

In Vermont, the Commissioner of Education gave impetus to the evaluation effort by appointing a committee of stakeholder groups to plan comprehensive evaluation of special education programs and services. Further, the State Board of Education endorsed the study by adopting the Commissioner's 1985 Operational Plan. The Education Department was charged to design and develop a special education program evaluation model for use on a district, regional, and Statewide basis to measure the quality of special education programs. The FY 85 Vermont study, SEA Evaluation Studies is the response to that directive.

Impetus for the Evaluation of the Impact and Effectiveness of Recent Changes in Florida's Graduation and Competency Test Standards on the Educational Opportunities Provided Handicapped Students arose from a number of sources. One is recent legal action taken on the part of handicapped students protesting the impact of secondary program options for educable mentally handicapped students. Another is the evidence of concern documented in the report of the Post Secondary Education Planning Commission entitled "Disabled Students Access to Post Secondary Education." The study recommendations include the establishment of a Department of Education position and specific goals for improvement of postsecondary programming for handicapped individuals. The activities of the Florida FY 86 SEA/Federal Evaluation Studies project will coordinate with the Florida Department of Education's secondary efforts.

The demands for accountability by State policymakers provided the impetus for the Minnesota FY 86 study of The Impact and Effectiveness of Entrance and Exit Criteria for Special Education Programs in Minnesota. The Minnesota Legislature has required the Minnesota Department of Education to explain the growth of special education, particularly in high incidence areas such as learning disabilities. The legislature mandated eight separate reports on special education for 1986, which is more than the number of reports for the previous 10 years combined. These reports called for data on the growth and effectiveness of services, along with the Minnesota Department of Education's recommendations for uniform criteria for learning disabilities and emotional behavioral disorder areas.

The 1983 authorizing legislation enabled the Department of Education to enter into eleven cooperative agreements in FY 84 and ten more in FY 85. For FY 86, eight awards totalling nearly $900,000 will support projects under this program. Federal funds pay for up to 60 percent of the total cost of the studies. State educational agencies contribute the remaining 40 percent of the cost. Examples of the types of issues that States are evaluating in the 1986 projects demonstrate the wide range of topic areas. These include:

- Related Services will be assessed in Minnesota and Hawaii. Minnesota is investigating the impact on educational and noneducational gains of students with learning disabilities, emotional behavioral disorders, and mild mental handicaps who receive occupational therapy service versus similar students who do not receive occupational therapy. The results of the study will compare the two groups' differences attributed to receipt of occupational therapy services. Hawaii is investigating the comparative effects of individual versus group speech/language therapy, direct versus indirect (consultative) occupational, physical, and speech/language therapy. The Hawaii SEA will determine the level of progress of students receiving occupational therapy and physical therapy in an educational setting.

- Services for Behaviorally/Emotionally Handicapped Students is the focus of study in North Carolina. The project evaluates the effects of a behavior targeting and curriculum development system on behavioral change of Behaviorally/Emotionally Handicapped (B/EH) students.

- Graduation and Competency Test Standards are under examination in Florida. The project is studying the programmatic and student outcomes resulting from implementation of State legislative changes in high school graduation requirements.

- Curriculum Based Assessment and Categorical Programming is the focus of study in Washington. The study is evaluating the effects of curriculum based assessment versus norm referenced procedures for determining categorical eligibility. Variables will be defined which distinguish categorical programming from standard programming received in the regular education setting. The study is measuring the long- term impact of categorical programming on a student's career.

- Pre-Referral Intervention for Students Experiencing Learning Problems in Regular Education will be assessed in Iowa. The study addresses how related services personnel apply interventions, criteria to determine effectiveness of services, and use of related personnel to assist regular educators in designing interventions for applications in regular education settings.

- Post-School Success of trainable mentally retarded adults is the focus of study in Nebraska. The components of success and the factors influencing success will be investigated.

- Local Entrance and Exit Criteria are under examination in Minnesota. The study is evaluating current practices and possible alternatives which could result in greater specification and homogeneity in each of six program areas: learning disabilities, mild mental handicaps, moderate-severe mental handicaps, emotional/behavioral disorders, physical handicaps and other health impaired handicaps.

The twenty-nine projects funded in FY 84, FY 85 and FY 86 span a time frame from October 1, 1984 to March 31, 1988. Although FY 86 is the third year of funding, the findings from the FY 84 studies are just being completed. The following sections summarize the findings from these initial reports.

Study 1: Services for learning disabled students. The Illinois State Board Department of Education examined how the State is serving learning disabled students, the nature of services provided, and variations in practices which may be associated with certain specific community level variables. Utilizing project-developed instruments, the evaluators collected data on 457 teachers and 1,349 students from all grade levels in 67 randomly selected school districts representative of all areas of Illinois, except the city of Chicago public schools.

Overall, 5.82 percent of the State's student population was classified as learning disabled. A large majority of the sample was not receiving any chronic medications (only 4.8 percent had any indications in their files that they are administered medication on a regular basis). However, 36.6 percent of the students had been retained in at least one grade and 23.8 percent came from single parent families. Most (99.3 percent) had English as their primary language, and 14.4 percent had been previously referred for special services but had not been found eligible prior to their classification as learning disabled. Males (920 = 69 percent) dominated females (413 = 31 percent) in the sample.

The study examined how students identified as learning disabled are selected to participate in the special education program. It was found that:

- The Wechsler Intelligence Scale for Children-Revised (WISC-R) was used in the original classification of 72.5 percent of the sample. If only the WISC-R IQs are considered, the average IQ (90.4) was significantly below the expected population mean of 100.

- Although academic achievement testing was conducted as a part of the classification process for most of the sample, achievement data was unavailable for 26 percent of the sample. Of the students tested, the Wide Range Achievement Test was most commonly used (85 percent). All of the students sampled were performing below the expected age level in the academic areas in which they were assessed.

- Forty and 6 tenths percent of the students who were eventually classified as learning disabled were referred because of an inability to perform academically commensurate with his or her peers. Attention deficits were the second largest area, accounting for 23.4 percent of the referrals, followed by reading problems (14.2 percent), language deficits (5.6 percent), behavior (5.5 percent), mathematics difficulties (2.0 percent), immaturity (1.4 percent), perceptual deficits (0.7 percent), and spelling problems (0.2 percent).

- Information on how students are classified as learning disabled and selected to participate in the special education program was further sorted by State area code, town size, number of students enrolled in the district and per capita tuition cost. No specific pattern emerged concerning demographic or other variables associated with the identification process on a Statewide, regional or local basis. Districts generally seemed to rely on the guidance of the special education cooperatives whose criteria varied considerably. It is possible that students who were classified in one district could move a few miles to another district and not meet the different classification criteria.

- There was no discernible pattern in the procedures used by districts to classify children as learning disabled. The larger districts tended to be slightly more likely to retain students in grades and to use more self-contained services than did the smaller districts. These results are not surprising to the SEA because larger districts have more students and could justify self-contained services on numbers of students and could more easily accommodate the class size changes that would result from retentions.

The percentage of time per day that students identified as learning disabled receive special services was another area of study. The critical findings were:

- The majority of students (64.9 percent) were served through resource programs where they spent an average of 5 hours and 52 minutes per week receiving these services.

- The second most common service delivery system was a self-contained program which served 29.2 percent of the sample. These students who, by definition, are served through special education programs more than 50 percent of the time, spent an average of 7 hours 23 minutes per week of their time in general education.

- The remainder of students (5.0 percent) received consultation services. On the average, their special education teachers spent 65 minutes per week consulting with the general education teachers. Generally, this was accommodated by a resource teacher as part of his or her duties.

The study also focused on the special areas of need that tend to be emphasized in programs for students who are labeled as learning disabled. To examine this question, the project studied the annual goals listed on the student population's 1984-85 IEPs. It was found that:

- Goals established for students in the sample were primarily academic in nature, with reading (36.3 percent), mathematics (29.1 percent), and language (23.1 percent) accounting for 88.5 percent of the total goals.

- Perceptual remedition, an instructional technique frequently used with learning disabled students, accounted for only .2 percent of the total goals.

The project was interested in determining what regular education remedial services are available to students identified as learning disabled in conjunction with their special education services. The main findings were:

- The only general education services that the students in the sample received on a regular basis were Chapter 1 services, (24 percent of the total sample in grades one through six) and lower level classes (18 percent of the total sample in grades seven through 12). The larger districts used lower level classes more often than did other districts. However, the project reported that this is probably due to the fact that many of the smaller districts were elementary districts or did not feel a need to provide this type of service. The districts with student populations between 500 and 1,000 offered more Chapter 1 services than did the other districts.

- Speech therapy was the most often provided related service (17.3 percent of the student sample).

- Other related services, including social work, psychological or counseling services, and occupational or physical therapy were less commonly provided (6 percent of the total sample).

The most general conclusion that the Illinois SEA reached is that the methods districts use to classify children as learning disabled are as diverse as the State itself. Some districts had adopted or were in the process of adopting discrepancy formulae to assist them in the classification process. Other districts were not even considering this as an option. Overall, districts tended to classify children as learning disabled if the children were slightly lower than average in intellectual capabilities and were experiencing academic difficulties. Many superintendents felt that while these children may not have met classical definitions of learning disabilities, they did need extra, individualized attention and service through the learning disabilities program was the only way that these needs could be met and funded. Appropriate means of providing monetary and instructional aid to these students who might "fall through the cracks" is an additional issue that needs to be studied. The SEA identified these findings as indicators for the need to develop some consistency in the classification and service provision process.

Study 2: Assessment and improvement of related services. The need for the Hawaii SEA to study the assessment and improvement of related services stems from the need of decision makers at all levels in Hawaii's special education and related service system for evaluation information that will assist them in determining service effectiveness and providing future program direction.

As a beginning measure, the project explored the extent of the problem concerning vacant related service professional positions and the retention of qualified personnel. The positions of interest were those of clinical psychologists and social workers, occupational therapists, occupational therapy assistants, and physical therapists. The review indicated that annual turnover rates in these positions ranged from 19 percent to 35 percent. Turnover rates appear most acute among occupational therapists (35 percent). Vacancy rates at the time of the study ranged from 10 percent to 35 percent. The highest level of vacancies at the time was within the physical therapy profession (35 percent). Occupational therapy positions had relatively low rates of position vacancies (12 percent of occupational therapists and 13 percent of occupational therapy assistants). The project contends that for each therapist who terminates his or her position, as many as 30 to 60 students may be affected by the turnover.

The study investigated the factors accounting for such high rates of turnovers and vacancies by surveying 55 administrators and supervisors throughout the State, and 30 related service providers who had left their positions. The results of the surveys indicate that a relatively low salary scale, poor working conditions, and attraction to a competitive market in the private sector were factors identified by both administrators and related service providers as reasons for turnovers and vacancies. (The study defined "poor working conditions" as long hours, year-long schedules, long distances to travel from site to site, and lack of suitable working space at school sites.)

The project studied the extent to which speech therapy services are provided as a related service in Hawaii in the spring of 1985. A total of 86 monthly speech, language, and hearing statistical reports completed by speech therapists in six of seven educational districts in Hawaii served as the data sources for this study.

Statewide, 109 therapists reported that they provided speech as a related service to 2,279 special education students. The Statewide percentage was 22 percent (2,279 of 10,267). Approximately one-half of the speech therapy caseloads were related services. The Statewide average related service caseload size per therapist was almost 21 students. The learning disabled (LD) category comprises over 50 percent of the speech therapy as a related service population in four of seven districts. In the remaining three, LD students account for less than 50 percent of the related service population but still remain the largest group receiving the service. The percentage of the total LD population receiving speech as a related service was 15 percent (1,154 of 7,538 LD students). Speech therapists also provided services to 2,300 speech impaired students. Approximately one-half of the total caseloads of speech therapists were speech impaired students who received speech as a primary service. The total number of students receiving service ranged from a low of four students to a high of 66 students per therapist.

The project further investigated summative information on occupational and physical therapy services gathered for a one-month period in the Spring of 1985 from each of seven districts. Two data sources, a single monthly summary page (28), and the daily record of therapy services (27) were utilized to provide the data for analysis. The project reports that the estimates derived from the data are conservative approximations of the amount of services delivered. Data missing within the report summaries or the daily record of therapy services tended to attenuate the total number of sessions and time required to provide services.

Occupational therapists and assistants were assigned a total of 1,096 students, and provided service to 1,038 students (94.7 percent). Therefore, within the month data were analyzed, almost 95 percent of the eligible occupational therapy (OT) students received OT services. A conservative estimate of the OT caseload was computed at slightly over 40 students per therapist or therapy assistant. The learning disabled comprise over 38 percent of the total OT student population. However, these students tend to receive sessions of a shorter duration than students with other handicapping conditions. The second and third largest consumers of OT services were the mildly mentally retarded and the severely multihandicapped who received 11.6 percent and 10.7 percent of the therapy sessions respectively. These three handicapping groups, LD, MIMR, and SMR, comprised 38.5 percent, 9.4 percent, and 14.9 percent, respectively, of all OT services. Estimates based on 671 students with complete data revealed that students typically received only three individual therapy sessions per month. The average duration of these individual therapy sessions was almost an hour-and-a-half. A sizable number of therapy sessions were cancelled. Approximately 330 students accounted for a total of 501 student absences or an average of one-and-a-half absences per absentee. Information on the factors for absences, and the types of students most frequently absent, has not been tabulated by OT personnel.

There were more small group (two to four students) than large group (five or more students) OT sessions (720 and 135, respectively). A total of 223 students received small group therapy while 73 students received large group therapy. Students in small group sessions were usually provided about three-and-a-half sessions per month, while students in large group sessions average less than two sessions per month. Mean duration times for small and large group therapy sessions were 1 hour, 40 minutes and 1 hour, 18 minutes, respectively. One hundred fifty-four students received a total of 232 consultation sessions, resulting in a mean of approximately one-and-a-half sessions per student, and a mean duration of 49 minutes per consultation session.

Physical therapists were assigned a total of 664 students in May 1985 and provided service to 493 students (74.5 percent). It is not known specifically why over 25 percent of the eligible students did not receive service during May 1985. A conservative estimate of the physical therapy caseload was computed at slightly over 39 students per therapist. The severely multihandicapped received the largest number of physical therapy (PT) sessions (384 of 1,234 sessions or 28.2 percent). The second largest number of sessions were provided to the orthopedically handicapped (242 of 1,234 sessions or 19.6 percent). The deaf-blind received the smallest number of sessions (four of 1,234 sessions; .3 percent). A total of 234 student absences were recorded, of which 194 were unexcused and 40 were excused. Therapists also participated in 53 IEP meetings in May 1985 involving 52 students. Meetings on SMH students were the most frequently reported.

Individual PT services were provided to 254 students. Seventy-six students in the severely multihandicapped category collectively received the largest portion of individual PT sessions, almost 28 percent of the total number of individual therapy sessions provided. Ninety-eight students received group therapy. Learning disabled students were the most frequent consumers of group PT. Physical therapists utilized consultation services most often with severely multihandicapped students.

Project staff concluded that the findings suggest that procedures used by related service providers to report and document services need to be strengthened, and that there is a need for systematic data collection and feedback to decision makers to increase efficacy of analyzing information useful in evaluating services.

The project further studied the evaluations that related service professionals conduct to determine student need for special education related services and recommendations resulting from those evaluations. Twenty-eight randomly selected related service professionals on Oahu who evaluated public school students for determination of eligibility for occupational therapy, physical therapy, and speech therapy, or mental health services were interviewed.

The findings from the interviews indicate that all four types of related service providers evaluate a diverse student population. These examiners bring into the testing situation their own theoretical backgrounds, experiences, and preferences. Therapists assume a great deal of flexibility in following existing guidelines and/or criteria for service. Only 43 percent of the participant sample affirmed the existence of such guidelines.

Some State and district level administrators expressed concern over variability in recommendations regarding the nature, frequency, and duration of service from district to district, school to school, and therapist to therapist. Further investigation of the actual variance in recommendations across the State appears warranted. Service models, treatment philosophy of the examiners, size of therapist caseloads, and differences in "professional judgment" all influence the nature and extent of recommendation variability.

The most frequently cited factor determining the type of service to be provided and the frequency and duration per session was the severity of a student's disability. External to the student, the size of the therapist's caseload was the most frequently cited factor.

Twenty-six of the 28 related service providers interviewed indicated that they provided input into determining the frequency, nature and duration of the services for which they evaluated students. Their input or role ranged from making the decision themselves to consulting with others about the severity of student need and the priority for service.

The study sought answers to the question of where the decision is made concerning the nature, frequency and duration of services. Most respondents (16) stated that the decision is made at the time the therapist drafts the evaluation report. Others (eight) identified the IEP meeting as the point of occurrence. Others (two) indicated that the decision occurred during the team meeting, and one response indicated that the decision is made at the parent conference. The project staff noted that according to P.L. 94-142, decisions regarding service delivery are made at the meeting where the IEP is developed. There appear to be at least two reasons for this disparity between principles or standards of P.L. 94-142 and the perception of the therapist's role in the decision making process. The first is that the examiner provides a series of recommendations regarding service delivery. These are often accepted without modification at the IEP conference. As this occurs over time, perhaps the distinction between the recommendation as a recommendation and the decision adopting that recommendation begins to blur. The second is an inexact comprehension of some requirements of the law regarding placement decisions. The project felt that this could be rectified through a series of inservice training modules.

The project also studied the perspectives of related service providers concerning the consultation services they provide to special education teachers in the Hawaii public school system. A survey questionnaire was distributed to 94 of 159 related service providers of therapeutic services in the State. These 94 respondents represent almost 60 percent of the professionals who are believed to provide consultation services to teachers and students in the public school system. Sixty-four responded to the survey, a 68 percent response rate. The response rate for occupational therapists was particularly high, 90.5 percent.

The average consultation caseload size of the sample was almost 16 students, yet there was wide variability both across professions and within professions in the size of the caseload. Speech therapists reported an average consultation caseload of three students while clinical psychologists reported an average of 49 students. In an average month, speech therapists reportedly provide consultation to fewer teachers than do other related service providers. Psychiatric social workers, on the other hand, reportedly consult with an average of almost 18 teachers per month. Although the psychiatric social workers typically report smaller consultation caseloads than clinical psychologists, they consult with a greater number of teachers than do those psychologists in the survey. Wide variations in the number of teachers reported to be receiving consultation services are noticed both across and within professions. Speech therapists typically reported less time (mean = 16 minutes) in consultation sessions than other related service providers. Occupational therapists, physical therapists, and clinical psychologists reported an average 30 minute duration of each consultation session. Psychiatric social workers indicated an even larger average duration (almost 44 minutes).

Study 3: Existing student study team processes. The California SEA evaluation project describes the characteristics of students brought to the attention of student study teams, the instructional modifications and interventions provided those students.

A cooperative case study approach was used by project staff in 29 volunteer elementary, intermediate, and high schools in 22 school districts within nine Special Education Local Plan Areas (SELPAs) throughout California. Each school selected staff persons to respond to the survey and the students on whom data would be reported. The aim of the student selection was to obtain a wide variety of student characteristics and modifications suggested by the student study team. There was no intent to randomly select students. For purposes of this study, the term "student study team process" was used to refer to all the various names used in the participating schools for their existing processes for group assistance to teachers and parents in helping their students and children to succeed in school.

Each school was already operating some form of student study team process. In the fall semester of the 1985-86 school year, school staff surveyed selected persons at their schools and kept project records on selected students. Instruments used to collect the data included a 15-page survey of participants regarding student study team processes, a two page log of student study team decisions, and a 30-page individual student record form. Project staff analyzed a total of 230 surveys, 26 logs, and 194 student record forms. The major findings of the study follow:

- The most frequent purpose of the student study team process was coordination of delivery of services, serving regular education students with learning problems, and referring students to other programs if necessary.

- The relative frequency of the student characteristics can be ranked according to the number of student records citing a given characteristic. "General Academic Performance" was the most frequently occurring student "problem" characteristic. Two other "overall" characteristics - Social/Emotional Adjustment and Academic Behavior - were the second most frequently occurring problems in student records. Reading was the most frequent individual subject "problem" area. These four characteristics, either alone or in some combination with the other characteristics, occurred in over 40 percent of the student records.

- The most common recommendation made by the participating schools was a recommendation for "Outside Resources Intervention", which incorporated all persons or programs outside the regular classroom and the regular classroom teacher. The second most frequent recommendation was for some change in the student's environment. Parent contact ranked third in frequency of modification/intervention suggestions.

- The time period for data collection was short, less than one semester. During this period, over 1,000 "active" modifications or interventions were attempted. The success or failure of one-third of these could not be assessed because of insufficient time. But, participant schools reported over 40 percent of the modifications/interventions that the student study team recommended did have some identifiable success. Less than 2 percent of the modifications/interventions were reported as clearly unsuccessful.

- No single definition of the student study team process was found. Each process was different in purpose, membership, and operation. School staff had tailored their processes to fit their schools, the resources available, and the need of their staff and students.

Study 4: High and low incidence of students with learning disabilities. In October, 1984 the Minnesota SEA began a study of the extremes in district reporting of learning disability incidence rates in public schools. Minnesota mirrors the national trend in that in 1975 the incidence rate was 2.5 percent, and by 1985 the rate had risen to 4.7 percent. Although these increases might seem small in terms of overall percentage, the cost in district expenditures for LD teachers in Minnesota during 1985 was $73,430,000 in Federal, State, and local dollars.

All 434 school districts were rank-ordered by the percentage of each districts' K-12 population identified as learning disabled in 1985. (The unduplicated child count data generated on December first of each year was used in choosing the high and low incidence group). Some districts were then eliminated from the ranking because of their geographic isolation and low number of learning disabled students, or because of the atypical nature of the setting and the eventual over-representation of Indian students in the sample. Districts were put into a high incidence group (HI) and a low incidence group (LI) based on extreme rankings. The student sample was composed of 154 students currently receiving LD services in the LI districts and 149 students in the HI districts. (All students in the LI districts were selected, and approximately 30 percent of the nearly 500 students in the HI districts). The project used three different instruments for data collection; these were district and student data forms, and a survey of teachers.

The two groups were demographically similar. Both were located in rural areas, and income levels in both groups were similar. One variable that did differentiate the two groups was the grade level when students were first referred. The HI group had first referred 22 percent of its LD students when they were in kindergarten or pre-kindergarten grade levels; while only 7 percent of the students in the low group were identified at these grade levels. If these students continued to remain in the LD programs, earlier identification would, of course, contribute to an increased incidence rate. The project suggests that districts who wish to continue with early identification efforts should be concerned with exit criteria for LD programs. In reviewing each student's history in the special education program, it was discovered that 82 percent of the students in low incidence districts and 72 percent of those in the high incidence group had never had their level of service changed. Of those students who had received a level of service change, approximately 70 percent had a change to a less restrictive option.

A major question investigated in this study was whether students met the criteria the districts used in order to determine eligibility for an LD placement. This information was only available in approximately two-thirds of the cases. In those cases where the determination could be made, slightly less than 60 percent of the students in both groups met local entrance criteria. Therefore, there was no difference between the high and low incidence groups on this variable. In cases where student data did not strictly meet the eligibility criteria, it appeared that override provisions were used quite frequently. From an anecdotal view, it appeared that both high and low incidence districts often abandoned their criteria in order to serve referred students who were having achievement problems.

The study hypothesized that low incidence districts might have a higher abundance of variables that contributed to increased academic engaged time, which in turn effected achievement. Such things as class size, homework requirements, and the availability of volunteers and tutors were investigated to determine if a relationship between these factors and incidence rates existed. No apparent differences between the groups in class size existed. With both groups having low teacher-pupil ratios, the low incidence group has approximately two to three more students per class than the high incidence group. None of the districts in either group had a written policy on homework. One variable that may have contributed to differences between the two groups was the use of aides and volunteers who worked with students. In the LI group, seven districts utilized aides and volunteers in the classroom, which presumably contributed to increased academic engaged time. Only three of the HI districts had aides and volunteers for this task. Reading curricula and programs, too, seemed not to differentiate the high and low groups. It was expected that LI districts would be more flexible in their expectations of whether students must master a book before progressing to the next book in the series. Contrary to this hypothesis, the low incidence districts were more rigid in this expectation.

One interesting finding was the high proportion of LD students who had been retained a grade. This factor did not differentiate the groups since more than one-third of the students in both groups for whom this information was readily available had been retained.

The majority of students in both high (82 percent) and low (76 percent) groups did not receive related services. Speech, which can stand alone on an IEP in Minnesota, was the most common additional service for both groups (LI = 15.4 percent, HI = 19.2 percent).

The majority of students had a reading goal on their IEP, although slightly more did in the high group (69.3 percent) than in the low (60.1 percent) group. The next most frequent goal in both groups was in the math area, followed by written expression. The "other" goal category was listed on the IEPs of half of the students. In the majority of cases, this category included such things as progress in mainstream classes, progress in particular subject areas such as geography or science, increasing visual and/or auditory memory, or improving assignment completion.

An additional piece of information gathered during the records review was whether the LD students had ever been retained in a grade. This information was only readily available in about two-thirds of the cases. Thirty-five percent of the students in the high incidence group had been retained, while 42 percent had been retained in the low incidence group.

The mean full scale IQ score for the high group was 99, while the mean score for low group was 96. There were approximately four points difference between verbal and performance scores. In the HI group the mean verbal score was lower, and in the LI group the mean performance score was lower. In both groups the Wechsler Intelligence Scale for Children - Revised was the most often used intelligence test.

Some experts suggest that LD students are likely to have significant verbal-performance discrepancies on the WISC-R, but this was not the case with the sample of students in this study. The discrepancies exhibited by this group were generally within the standard error of five points. Again, the performance on tests of academic aptitude was not significant enough to differentiate the two groups. However, it should be noted that possibly half of the students may not meet LD criteria. Different findings are possible if only students who met LD entrance criteria were studied.

Study 5: Early education programs for handicapped children. In 1977, the Louisiana State Legislature enacted Act 754 (Education of All Exceptional Children Act), a parallel of P.L. 94-142. Act 754 mandated services to identified handicapped children 3 to 5 years of age, and permitted services to children from birth to two-years who have serious handicapping conditions, which, if untreated, could become greatly compounded by the time these children reach school age.

The Louisiana State Department of Education proposed to evaluate the quality and efficiency of the early education program for handicapped children in Louisiana. The major objectives of the evaluation included the definition of program models, identification of the factors within these models that are associated with program effectiveness and efficiency, and the measurement of program outcomes.

The study consisted of four major segments: a naturalistic study designed to provide the foundation for a design matrix, one axis identified the data to be collected and the others identified potential data sources; first-wave case studies designed to facilitate access to data and to check the feasibility and content of questionnaire/interview protocols; expanded second-wave case studies designed to field test data collection instruments and to continue the qualitative investigatory component; and the final third-wave component designed to collect quantitative and qualitative data via use of data collection instruments, personal interviews, telephone interviews, group interviews, and classroom observations.

Thirteen separate instruments were developed to collect information from school administrators, teachers, aides, bus drivers, related and support persons, and other service providers in the programs, as well as from parents. Class and student profiles were also developed to collect information about the numbers and types of children being served by the program, and the performance of those children.

The evaluation was based upon a multiple-model research design that included data collection via 39 program visits, 59 class observations, 570 surveys/questionnaires, 1,020 personal interviews with program personnel and parents, 303 class profiles, 606 individual student profiles, and more than 664 hours of on-site field work.

The quantitative outcome measures used in this study included children's developmental gains in major skill areas, children's exit placement status, and kindergarten teachers' ratings of the children's performance in seven different areas. In reviewing the developmental gains, it is important to note that the gains occurred over a 7- to 8-month period of instruction. Also, the children, who have a wide range of exceptionalities or handicapping conditions, may not progress at a normal developmental pace.

The mean gains in the areas of fine motor writing and fine motor manipulation were 10.4 months and 10.9 months, respectively, with a range of 0 to 24 months. In the cognitive matching and cognitive naming area, mean gains were 11.6 months and 10.1 months with a range of 0 to 36. Mean gains in the language naming and language comprehension areas were 9.6 months and 11.8 months. Gross motor (object movement and body movement) mean gains were 9.6 months and 7.7 months.

The gains in the self-help areas of eating, dressing, grooming, toileting, and self-direction should be reviewed cautiously, as many teachers either were unable to establish basal or ceiling scores, or assumed age-appropriate skill mastery and did not test those areas. The mean gains ranged from a low of 1.7 months in eating, to a high of 11.1 months in dressing.

The factors most highly correlated with the children's developmental gains were program demands, challenges of serving severely and profoundly handicapped (SHP) children, and related services challenges. It would appear that the manner in which systems minimize hassles such as excessive paperwork, or help the staff cope with other demands, such as maintenance-of-health procedures or working in isolation, is associated with program outcomes. The kinds and frequencies of services provided, particularly to SPH children, also appear to be important. Finally, the communication and cooperation among the related services staff and the classroom teacher constitute another factor associated with positive program outcomes.

Analysis of the exit placement data revealed that the projected placement for 40 percent of the children being served by the program was regular kindergarten or regular kindergarten with some support services. This figure represents 234 of the 578 children for whom data were provided. The projected placement for 44 percent of the children was self-contained classrooms, and for 16 percent, special centers or an institution.

Kindergarten teachers' ratings of the children's performance were surprisingly high and may have been slightly inflated due to the method of data collection. Modal data indicate that the kindergarten teachers most frequently rated the children as on line with the class average in six of the seven skill areas. In the seventh, expressive language, they rated the children above the class average. The strongest showing by "graduates" of the preschool program was in their degree of independence. Fifty-one percent of the kindergarten teachers rated the children as on line with the class average or above the class average in this area.

Project findings suggest that the Louisiana State Department of Education:

- Provide direction and instructional leadership for teachers in an effort to maintain a balance between the developmental and the pre-academic approaches to the education of young children. During the 59 classroom visits, the evaluators observed a dichotomy of approaches (the developmental and the pre-academic) to the training of handicapped children in the preschool program. Many of the teachers reported that the children in their classes were developmentally delayed and need the opportunity to acquire skills that are age-appropriate, such as fine and gross motor movements, and expressive and receptive language. They also reported that the tasks that they use to address these needs are developmentally sequenced to meet the individual needs of each child. In contrast, the evaluators observed other preschool classes in which handicapped children were taught pre-academic skills. The project staff recommended that policy decisions be formulated to identify the appropriate approach or acceptable balance between the two, and that recommendations be made known to teachers.

- Conduct a longitudinal study to document the efficacy of the immediate and long-term effects of the preschool program for handicapped children. Kindergarten teachers tended to rate the graduates of the preschool program as average or above average in performance on seven major skill areas as compared with other children in their kindergarten classes. School administrators and parents perceived the gains made by the children as a primary benefit of the program. However, some special education supervisors expressed concern about the long-term effect of the program on their performance. The supervisors cited instances in which children who were mainstreamed into regular kindergarten classrooms were referred back to special education by the time they had reached second or third grade. The project suggests that a longitudinal study of children currently in the program is needed to track initial program participants through their subsequent educational programs.

- Formulate and disseminate on a Statewide basis a legal opinion related to the implications of the maintenance-of-health procedures and the liability of program personnel (teachers and aides) who may perform these procedures with or without medical training.

In conducting this study, divergent views emerged in terms of the responsibility of program personnel for performing maintenance-of-health procedures. Administrators, teachers, aides, and nurses expressed concern about the requests from parents to perform these procedures, but definitive answers as to who was legally responsible for performing these procedures were not available. A legal opinion addressing this issue is critically needed to serve as the basis upon which specific guidelines can be developed for program personnel. If responsibility for providing these services is subsequently placed upon program personnel, then information and training should be sought from representatives of the medical profession to ensure that maintenance-of-health needs of the children are being met in accordance with sound medical practices, and to ensure that the effects of what teachers report as a major stress factor in their work are minimized.

Study 6: Aggregation of local evaluation findings. The Massachusetts Department of Education evaluated the impact and effectiveness of special education programming on a Statewide basis by aggregating the results of evaluations performed by local educational agencies. in 1981, the Commonwealth of Massachusetts developed the "Management Tool Model" (MTM) for use by local education agencies. The MTM assesses the impact and effectiveness of special education programming upon student achievement of physical and emotional well-being, knowledge of use of the environment; acquisition of skills and knowledge; a commitment to the rights and responsibilities of citizenship; occupational competence, and creative interests and talents; the extent to which special education programs effectively evaluate children, and encourage parent and public involvement; the quality of special education facilities and services; and, the extent to which staff development activities improve staff skills. The Massachusetts SEA proposed to study the extent to which programmatic objectives stated in the Management Tool Model had been accomplished for students across all prototypes and programs in the State.

Assessment of Evaluation Models. A preliminary project activity was to assess the various evaluation procedures in use in Massachusetts. Local educational agencies were asked to submit a copy of the report of the most recently conducted evaluation. One hundred and ten (110) local educational agencies complied with this request. An evaluation assessment instrument was developed to determine the extent that the evaluations employed legitimate and acceptable evaluation practices. Experienced evaluation consultants rated each evaluation report and convened as a panel to critique the individual ratings and to generate a second rating for each report.

The 110 evaluation reports were then categorized into one of five evaluation model groupings based upon rater determination: The Management Tool Model (MTM), the Management Tool Model - Adapted (MTM-A, the Management Tool Model used with improvement or adaptations); Quantitative Evaluation Strategy (quantitative methodology); Qualitative Evaluation Strategy (qualitative strategies such as visitations, interviews or observations); and strategies that used mixed approaches. The majority of the reports using the Management Tool Model (70 percent) and the Management Tool Model - Adapted (62 percent) included recommendations that were consistent with the findings. Approximately one-half of the Quantitative and the Qualitative Evaluation Strategy reports provided recommendations that were consistent with the findings. Only 20 percent of reports that used a mixed strategy developed such recommendations.

Survey of Evaluation Methods. In February, 1985, a project-developed survey was distributed to 336 local educational agencies and educational collaboratives to obtain information about the evaluation practices in use, general demographic information, use of evaluation results, and general information regarding evaluation practices. The follow-up procedure to nonrespondents included a second mailing, followed by subsequent telephone calls and personal letters. At the conclusion of these activities, 182 surveys had been returned.

Analysis of the data generated by the survey revealed that most LEAs selected evaluation strategies that were easy to implement and low in cost. Approximately 37 percent of the respondents employed qualitative strategies, while an additional 37 percent used either the Management Tool Model or the Management Tool Model - Adapted. A number of LEAs (17 percent) selected evaluation methodologies that mixed Qualitative and Quantitative Evaluation Strategies. Ten percent of the respondents use a goal based strategy other than the Management Tool Model or the Management Tool Model - Adapted. The majority of the respondents who used the Management Tool Model (64 percent) conducted evaluations of their entire special education program. LEAs tended to evaluate program components when other models were used.

The cost of evaluation appeared to vary widely among LEAs. In general, goal based evaluations tended to be less expensive than other types. Most evaluations were funded with local or EHA-B funds, though technical assistance grants were used to finance a number of Management Tool Model evaluations. In general, evaluations took from 1 to 12 months to complete and consumed between 1 to 20 days of staff time. Special education staff participated for a median of 5 to 6 days. Respondents indicated that program planning and inservice development were the most common benefits of the evaluation process.

Qualitative Validation. Qualitative validation was conducted in four representative sites to determine the accuracy of the local educational agencies' findings. The special education director or the individual responsible for carrying out the evaluation were interviewed, using a project-designed probing interview guide, to assess the extent that MTM procedures were properly implemented. Next, the project assessed the extent that LEA evaluation results were representative of district program strengths and weaknesses by interviewing individuals knowledgeable about the special education program at the time of the evaluation. Three LEA staff members in each district were asked to nominate a sample of individuals to be interviewed. The project determined, through the qualitative validation that the Management Tool Model was employed properly. Further, the qualitative validation interviews confirmed the results of the LEA evaluations as indicated in the Management Tool Model reports.

Aggregation of Local Evaluation Findings. Those districts which employed the Management Tool Model were selected for the aggregation of local evaluation findings. Reports of the final subject pool were reviewed by project consultants to determine if the specific instruments in the Management Tool Model had been properly employed and completed. The final review of all reports resulted in 20 district reports which could be properly aggregated. The demographic and attribute variables in the sample were found to be consistent with the State as a whole. The districts in the sample, therefore, fairly represent the Commonwealth.

The resultant data from this analysis were interpreted by members of the SEA project staff, and experts from programs across the Commonwealth. A number of positive findings emerged:

- Special education programs in Massachusetts are considered effective in developing basic skills in language arts, mathematics, the encouragement of an understanding of our democratic society, and the commitment to the rights and responsibilities of citizenship.

- Special education programs develop attitudes and behaviors which lead to an effective use of the environment and the development of creative expression.

- The programs are also effective in providing beneficial physical education, enhancing student self-concepts, and cultivating positive values and attitudes among students.

- Special education programs also facilitate sound educational planning and encourage a working partnership between the parents and the school.

- Globally, the programs effectively use high quality school facilities, possess a high quality range of services, and provide facilities and services that meet unique student needs.

- Special education programs were found to effectively use the IEP goals to allow the TEAM to judge program success.

The project also identified areas in which special education programs were determined to be less than effective:

- Special education programs were not as successful as they should be in developing the student's desire to learn.

- Programs were also less than satisfactory in the provision of job skill experiences and work attitudes necessary for initial job placement, and skills and attitudes necessary to adapt to changing job situations.

- The working partnership between the general public and the school regarding school decisions was another area in which improvement is needed.

- Programs were judged to be less than effective in the provision of inservice training which meets staff skill needs and which improves staff attitudes.

- Systematic determination of successful programs and the redesign of unsuccessful individual classroom programs were areas judged to be less than effective.

Study 7: Secondary Programming for Handicapped Students. The New York State Education Department, Office for Education of Children with Handicapping Conditions, evaluated the impact and effectiveness of New York State's effort toward the provision of a free appropriate public education - an evaluation of secondary programming for mildly handicapped students. The purpose of this study was two-fold. First, to determine the strategies and methodologies by which mildly handicapped students successfully complete high school diploma requirements; and second, to determine the extent to which dropout prevention services exist and are provided to mildly handicapped students at risk, and to ascertain the relationship between the perceptions of school personnel and mildly handicapped students regarding the reasons for these students dropping out of school. Data for analysis, obtained through a random selection process, are representative of 411 graduated students from 66 local educational agencies from upstate New York, and 374 students who withdrew from 50 upstate LEAs. Data are also representative of 710 graduated students and 339 students who withdrew from school in New York City.

Through this study, it was found that mildly handicapped students, regardless of classification, can succeed in school and earn a high school diploma when given access to regular education and equivalent special education courses. More than 75 percent of all the school districts sampled had policies or procedures assuring handicapped students access to regular education credit bearing courses. Conversely, only 63 percent of the upstate sample school districts and New York

City had similar policies assuring handicapped students access to an approved course of study in special education which would lead to a high school diploma.

Upstate school districts primarily rely upon regular education courses as the means by which most mildly handicapped students (97 percent) obtain course credit; upstate students are enrolled in equivalent special class programs far less frequently. New York City, on the other hand, places diploma-bound handicapped students predominantly in equivalent special class programs (85 percent), rather than in regular education courses. In either placement, data indicate that handicapped students can be highly successful. Ninety-eight percent of upstate students and 96 percent of New York City students who participated in regular education courses, passed at least one course. Over 90 percent of the upstate and New York City mildly handicapped students were successful in equivalent special education programs on the first try.

Four out of five mildly handicapped students took the state competency tests along with their nonhandicapped peers. These students achieved a high rate of success. For upstate students on their first attempts, 92 percent passed reading, 84 percent passed writing and 77 percent passed mathematics. For New York City students, on their first attempts 77 percent passed reading; 75 percent passed writing, and 54 percent passed mathematics.

Support services were provided by 100 percent of the school districts to mildly handicapped students. For upstate New York, special education support services were provided to 72 percent of the sample students, and regular education support services were provided to 60 percent of this sample. New York City provided special education support services to 80 percent of mildly handicapped graduates, and regular education support services to 38 percent of this population of sample students. Although regular and special education support services were readily available in school districts, data revealed no relationship between the number of such services offered and the percentage of students graduating.

For mildly handicapped students in upstate and New York City school districts, no sequence of courses or type of program was favored enroute to the attainment of a high school diploma. Programs differed on a Statewide basis upon student needs and demographic considerations.

All sample school districts reported the availability of dropout prevention efforts. These efforts were provided to 88 percent of the upstate sample students who withdrew from school. Moreover, school personnel accurately perceived the students' reason(s) for leaving school with 75 percent accuracy. A prolonged secondary school experience requiring more than 4 years for completion, and enrollment in restrictive special education programs are associated with higher dropout rates. Most students who withdrew from school planned to obtain employment the first year upon leaving.

These seven initial State educational agency/OSEP cooperative program evaluation studies represent a broad array of measurement techniques and design.

The effect and impact of issues considered included student status and performance, service delivery, and program administration. The evaluations collectively encompassed all disabilities and all age levels. These reports represent a commitment by SEAs and OSEP to systematically obtain information on the impact and effect of providing and delivering special education and related services. It is expected that as the States and OSEP accrue experience these evaluation efforts and findings will increasingly affect decision making.

State and Local Evaluation Studies

This section describes selected State and local educational agency supported program evaluation studies recently completed or currently underway. These studies were provided by State and local educational agencies in response to a request for such evaluation information by NASDSE in July 1986. The purpose of this section is not to describe comprehensively all evaluation studies conducted by State and local educational agencies, but to provide examples of the types of efforts SEAs and LEAs are making to assess the effectiveness of their programs consistent with Section 613(a)(11) of EHA-B. These studies are presented by three areas representing topics frequently evaluated by SEAs and LEAs.

- Least restrictive environment (LRE)
- Eligibility for Services
- Previously Unserved and Underserved Children

Examples of State and Local Evaluation Studies Pertaining to LRE

State and local educational agency responsibilities for educating handicapped children in the least restrictive environment are specified under Section 612(5)(B) and 614(a)(1)(C)(iv) of the EHA. Some State and local educational agencies have attempted to determine how well they are meeting their responsibilities by undertaking evaluation studies to examine whether their educational programs are, in fact, effectively educating handicapped children in the least restrictive environment. These studies typically identify problems that have emerged in serving these children, as well as strategies for improving the appropriateness of educational placements in the future. Among the State and local studies pertaining to the education of handicapped children in the least restrictive environment are evaluations that investigate the effects of different classroom placements, and teacher licensure on academic achievement, and skill acquisition of handicapped children and their nonhandicapped peers. The following are provided as examples of such evaluation efforts.

Study To Determine the Effects of Teacher Licensure On the Academic Achievement of Mildly Handicapped Students. Under a grant from the Minnesota State Department, the Minneapolis Public Schools conducted a study in 1985 to determine the effect of special education teacher licensure on the reading achievement of learning disabled (LD) and educably mentally retarded (EMR) children. Aside from the philosophical arguments regarding noncategorical vs. categorical approaches to intervention, the study was motivated by practical issues sometimes associated with an instructional model utilizing categorically certified staff. These include personnel shortages, fiscal constraints, and the potential for service duplication, particularly in rural districts where particular services may be needed for only a limited number of children. In order to determine the importance of a specific categorical license in the instruction of LD and EMR children, this study tested four hypotheses. These were to determine: 1) if LD students instructed by teachers with an LD license achieve the same as LD students instructed by teachers with an EMR license; 2) if EMR students instructed by teachers with a license to teach EMR students achieve the same as EMR students instructed by teachers with a license to teach LD students; 3) if LD students instructed by teachers with a joint license achieve the same as those instructed by teachers licensed to teach LD; and 4) if EMR students instructed by teachers with a joint license achieve the same as those instructed by teachers licensed to teach EMR. In addition, the study examined the differences in teaching methods used by teachers with different licenses and the instructional methods that impact the academic performance of LD and EMR students.

A sample of 108 LD and 108 EMR students who were receiving services in Level III, K-6 school-based resource programs were selected for the study. Students in Level III spend up to 50 percent of their day in the resource room where they receive direct instruction and/or support services. Students were selected from 36 classes; 12 of these classes were taught by teachers with an LD license, 12 by teachers with an EMR license, and 12 by teachers with a joint LD/EMR license. Three EMR and three LD students were selected from each teacher's caseload. Both standardized achievement tests and curriculum-based measurement instruments were administered to assess student growth in reading over approximately a 7-month period. Teacher methods of instruction were observed and data analyzed using the Structured Instruction Rating Scale (Skiba, Wesson and Deno, 1982).

Results of the study indicated the reading improvement of LD and EMR students was independent of the type of categorical license possessed by a student's special education teacher. LD and EMR children progressed equally well when instructed by teachers with LD, EMR or LD/EMR licensure. The study further found that the instructional styles of the LD, EMR, and LD/EMR teachers studied did not vary when teaching handicapped children of varying disability categories. Of the 13 types of teacher interactions studied (e.g., academic engaged time, pacing of instruction, silent reading practice, oral reading practice, etc.), significant differences were found only for pacing of stimulus; while EMR teachers provided more student response opportunities, overall teaching styles did not vary. Study results also determined that the handicapped child's category of disability (LD or EMR) was not predictive of student growth. Both groups of students made similar gains as measured by the study. This study suggests that these variations in teacher training and licensing have a limited relationship to student outcomes. The results of this study appear to have implications for administrators concerned with student grouping for instruction and the use of single category vs. multi-category resource room models.

An Investigation of Time-On-Task for Learning Disabled Students. In 1985, under a grant from the Minnesota Department of Education, investigators at the University of Minnesota conducted a study to examine the attentional behaviors of learning disabled (LD) and nonhandicapped students in a variety of classroom arrangements and subject matter, in order to evaluate the effectiveness of these arrangements. Based on research, educators have long believed that attention is a prerequisite for learning and, further, that certain handicapped children, such as those with learning disabilities, have difficulties in achieving satisfactory performance because of inadequate attentiveness. Schools in Minnesota, as in other States, have implemented strategies that reduce class size or the student/teacher ratio (e.g., by forming special classes, using "pull-out" programs, or adding itinerant teachers or aides to the regular classroom) on the assumption that they would improve both attentiveness and learning of handicapped students. However, the Minnesota SEA, in reviewing the empirical basis for such strategies, had found little evidence to support their use. It was anticipated that this study would provide better information on which to base decisions related to student placement and grouping for instruction.

The study was designed to test several hypotheses: (a) there will be no difference in on-task behavior between learning disabled and nonhandicapped students in the regular class; (b) on-task behavior for the learning disabled student in the special class will be superior to that found in the regular class; (c) sustained attention (on-task behavior throughout a session or lesson) for the learning disabled will be superior in the special rather than in the regular class; (d) there will be no difference in on-task behavior across subject matter; and (e) on-task behavior will be superior in the smaller group sizes.

A sample of 50 students, enrolled in grades four, five, and six in four elementary schools of one district, was selected for this study. Thirty of the students were classified as learning disabled and 20 were nonhandicapped. The learning disabled students were evenly divided into three groups, each corresponding to a specific level of service. The first group of students was placed in the regular class where they received special instruction on an as needed basis. The second group of students, placed in the regular class for the majority of the day, generally received special instruction once a day, for approximately 45 minutes. Instruction was provided by a special educator in groups of four students. The third group of LD students was assigned to a self-contained class with less than 17 students, the average being 10. Children in this third group were all identified by a district child study team as being extremely academically impaired, that is, more than two years behind age peers in some academic area, usually reading, and incapable of progress in mainstreamed classes. The 20 nonhandicapped control students were selected from the same classrooms of the first two groups of LD students and matched on gender and ethnic background, and as closely as possible on some measure of ability or achievement. The LD and nonhandicapped students were often engaged in the same activities under the same teacher, allowing direct comparison. There were no nonhandicapped controls for the LD students served in self-contained classes.

Observational data were collected in the classrooms of all 50 students. Each student was observed during at least seven visits for a total of 3,773 ten-second interval observations/per child. Observations were conducted during instruction in math, reading, social studies, language arts, and science. Twenty-two categories of behavior were observed and recorded. These categories included: on-task (e.g., behaving in a manner appropriate for the lesson, such as listening or writing); waiting (e.g., waiting in an appropriate manner for teacher direction or help); orienting to other than task (e.g., attending to another person or self); fine motor movement; gross motor movement; verbal (e.g., speaking, whistling); and daydreaming (e.g., lack of responsiveness, noninvolved behaviors). Combinations of different behaviors were also observed and recorded (e.g., waiting for further direction from the teacher while strumming one's fingers).

The study found that learning disabled students in the first two groups showed equivalent or greater attentiveness than did their nonhandicapped controls. Contrary to the expectation that LD students would show inferior attention, the study found that the most severely disabled LD students were significantly more attentive than the two groups of nonhandicapped controls. The study report suggested that this superior performance can probably be explained by the fact that these students were in small self-contained classrooms while their peers were in regular classes with a greater number of students. With regard to group size, the study found for both the LD and nonhandicapped students, that as the size of the instructional group decreases, student time-on-task increases. Attention was significantly greater for small (two or fewer students) and medium (three to nine students) size groups than for the large (10 or more students) groups, with no difference between the small and medium size groups in the amount of attention. This finding suggests that one benefit of special education classes, which tend to be smaller in size than regular classes, is that there is greater student involvement and time-on-task. For each subject matter observed, both the LD and nonhandicapped students were about equally engaged with the learning tasks. A slight decrement in attention from the beginning to the end of a lesson was found (lessons observed were 45 minutes in length), but this decrement was found in both the learning disabled as well as nondisabled students. The study's authors suggest that although effort, drive, and time-on-task seem to decrease somewhat as the lesson goes on, the effects seem to influence both groups in a similar manner.

In summarizing the results of this study, its authors make several conclusions. First, with regard to overt measures of attention, the learning disabled student is no different from his nondisabled counterpart. This study did not, however, investigate other types of attentional deficits such as covert auditory attention handicaps which might have a bearing on the student's performance. Second, the LD and nonhandicapped students were both able to sustain reasonably high levels of attention over a 45 minute period, which implies that substantial amounts of time can be devoted to instruction. Third, the findings from this and other recent studies cited by the authors consistently show that time-on-task increases as group size decreases, suggesting the value of small classes for learning and nondisabled students. Finally, the authors suggest that overt attentional deficits, while perhaps symptomatic, should not be thought of as a possible general and fundamental cause of academic difficulty.

Examples of State and Local Studies Pertaining to Student Eligibility for Special Education and Related Services

In order to receive State grants under EHA-B for special education and related services, States must ensure that children are evaluated and determined eligible as handicapped in accordance with the definitions (Section 602) and evaluation procedures (Section 612(2)(C)(5)) specified in EHA. To implement these provisions, States have established standards in their regulations or in administrative policy to guide local educational agencies in determining student eligibility. These standards often include timelines for conducting evaluations, procedures and tests to be used in screening and evaluating students, and specific criteria that must be met in order to determine eligibility within categorical definitions. State guidance in this area is designed in large part to minimize subjectivity in the decision-making process, to assure efficiency and fairness in the evaluation process, and to obtain greater consistency within and across school districts in the number and characteristics of children served within a specific handicapping category. The studies described here are examples of LEA-sponsored evaluation activities to improve the effectiveness of procedures to identify and evaluate minority children who are potentially handicapped, and to increase the efficiency and quality of evaluations conducted.

A Study To Determine The Effectiveness Of Referral And Eligibility Procedures. The Montgomery County (MD) Public Schools is currently conducting a study to determine the effectiveness of the district's procedures for referring students for evaluation and for determining eligibility for special education programs. As part of this study, the district is also investigating the extent to which the county's special education policies and procedures provide effective and efficient support to staff involved in the referral and eligibility process. The impetus for this study came from several sources. Recent statistics had indicated a continuing trend of disproportionate placement of racial and ethnic groups in the district's special education program. In addition, issues related to the equity, effectiveness, and efficiency of the district's referral and eligibility procedures had been raised 2 years ago in a report by a local citizens group and in a survey of elementary school principals, and, more recently, by the district's Office of Alternative Education Programs. Finally, the district's Board of Education has recently established, as a priority, increasing the achievement of minority students and assuring their equitable representation in the school district's activities and programs. The study is designed to determine whether children are appropriately referred and found eligible for placement in special education; whether referral and eligibility procedures are consistently applied across the district; and whether procedures for the initial referral and determination of eligibility of students for special education are effective and efficient.

A sample of 28 elementary schools has been selected from each of three administrative areas in the district. School selection was based upon such factors as school size, minority student enrollment, student mobility rate, and the availability of designated special resources (e.g., Chapter 1 funds), or model/pilot special education programs (e.g., a special LD project). For each of two groups of students within each school selected, the study is examining what occurs during the referral and eligibility process. The first group of students (Group 1), consists of a stratified random sample of 280 children (K-6) who were referred and placed in special education programs within their school during the 1984-85 school year; 10 students from each school were selected. Samples were drawn on the basis of race and placement in one of the following programs: specific learning disabilities, emotional impairment, mild retardation, and mild speech and language disorder. The second group of children (Group 2), consists of 280 children who are not handicapped but who have been identified as experiencing some type of academic or behavioral problem. To obtain this group, school staff in each of the 28 schools were asked to identify at least 20 children who had never been referred for evaluation or served as handicapped but about whom staff had expressed concern, and for whom the staff planned to explore some type of special assistance. From this group, a stratified random sample of 10 students in each school was selected based upon race and the academic or behavioral area of concern.

Record reviews and staff interviews are being conducted for each of the children in Group 1 to describe the immediate past activities which resulted in the determination of their eligibility for special education. Data being collected includes information related to prior screening results, alternatives implemented prior to their referral for evaluation, reasons for referral, assessment instruments used, the extent of parent involvement in the process, and participants' satisfaction with the process. For children in Group 2, record reviews, staff interviews, and structured observations of special education referral and eligibility meetings are being conducted to obtain data on the current referral and review practices, issues of concern identified for each child by staff, and alternative strategies implemented before and after team meetings were conducted for each child.

Several reports related to the results of the study are planned. These will be submitted to the district Board of Education in the winter of 1987. At least one of the reports will describe effective prereferral strategies identified by the study. It is anticipated that the results of the study will provide direction to the district for improving its practices and procedures for student referral and the determination of eligibility for special education.

Study To Validate The Effectiveness of A Procedure To Screen Potentially Handicapped Children. As part of continuing efforts to more effectively and efficiently identify children in need of special attention (e.g. individualized attention in the regular class, evaluation for special education, etc.), the Philadelphia (PA) School District reviewed a variety of screening instruments. The purpose of this review was to identify an instrument that could be used to supplement teacher observations of children in the general education program and more effectively discriminate between students experiencing educational problems from those at risk of being handicapped. Such an instrument would facilitate the early identification of children with handicaps and would assist in the more efficient utilization of teaching and diagnostic personnel. The district's review of screening instruments led them to select, for possible use, the Initial Screening Checklist (ISC) (Harris, King, and Drummond, 1980). Because the instrument had been normed on a rural population, the district conducted a study, which was reported in 1985, to determine the instrument's applicability to a large urban setting with significant minority populations (e.g., black and Hispanic).

The ISC is a teacher rating scale containing 45 items designed for use with students in kindergarten through Grade 12. The items relate to behaviors which can be grouped into the following categories: attention problems, inadequate self-image, introverted/depressed, acting out, motor deficits, and neurological deficits. Teachers who have had 6 to 8 weeks of experience with a student, rate how often a specific behavior occurs on a five point scale from an occurrence of "never" to "very often". Results of the screening are intended to indicate whether additional evaluation of the student is warranted. For this study, two samples of students was selected. A stratified random sample of approximately 1,900 handicapped students was selected from among self-contained classes for the learning disabled (LD), socially and emotionally disturbed (SED), and educable mentally retarded (EMR). Every self-contained LD, SED and EMR class in the district was sampled. A sample of 7,200 nonhandicapped students was selected from 86 schools representing all program levels (e.g., elementary, secondary, vocational) in the district. Within each school, students were selected randomly. Results were analyzed using descriptive analysis, factor analyses, and analysis of variance. Analyses were conducted separately for each race, sex, grade, and age group, to assure that the instrument did not over or under identify certain groups.

Results indicate that the ISC was able to discriminate between students identified as handicapped and a general student population. In addition, the instrument was able to discriminate between students diagnosed as SED and those diagnosed as either EMR or LD. Authors of the study concluded that the ISC would be an efficient aid in screening students at all grade levels to determine the need for evaluation for a possible handicapping condition. The instrument is being used currently throughout the district to assist teachers in identifying students who may need some type of individualized instruction or who may be in need of evaluation for a possible handicapping condition.

Evaluation of the Psychological Services Program. In 1985, the Dade County (FL) Public Schools conducted a study to investigate the causes of a continuing backlog of cases awaiting psychological evaluations for students being considered for special education programs. While the study focused primarily on the backlog of cases, also examined were the delays common in the entire psychological evaluation process, including referral, psychological evaluation/testing, and staffing. Factors examined as possible causes of the delays included the level of need for program services, the psychologist's duties and activities, the productivity of the program, the level of false-positive evaluations, the supervision of the school psychologists, and the standards for quality in the psychological evaluations. Data on these seven areas were obtained via questionnaires completed by school psychologists and principals, and a random sample of 100 student cases was analyzed for descriptive information on the type of evaluation requested and the time involved in completing the major steps of the evaluation process. In addition, to obtain information for comparative purposes on the psychological services models being used by other large school systems, a telephone survey was conducted of the following six school districts: Broward County, FL; Duval County, FL; Hillsborough County, FL; Houston, TX; Los Angeles, CA; and Philadelphia, PA.

Results of the study indicated that at least 3,400 students were awaiting psychological evaluations in April, 1985. This represents a sizeable backlog that would take the current staff of school psychologists at least three-and-one-half months to process if no new referrals were processed. Nevertheless, the school psychologist's productivity level was found to be comparable to that in the other large school systems surveyed. While these data suggest a need for an increase in the number of school psychologists, the level of false-positive evaluations was found to be an important factor affecting the size of the backlog. The false-positive rate for initial evaluations of 24 percent in Dade was comparable to a false-positive rate of 25 percent in Houston. However, the evaluations for gifted placement (about 20 percent of all evaluation cases in Dade County), had a false-positive rate of about 67 percent. Improvement of the screening of students referred for gifted placement would mean a substantial reduction in the backlog of students waiting for evaluation, and consequently, a smaller increase in the number of school psychologists needed.

Findings also indicated that the qualifications of supervisors should be increased and that the program lacks acceptable standards of quality in the psychological evaluations. While these two components may not be direct causes of the backlog, they seem to have an impact on the overall efficiency of the psychological services program. For example, data indicated that school psychologists believe that the supervision they receive is neither appropriate nor adequate, because their supervisors who are area supervisors of special education lack formal training in psychology and cannot provide assistance on technical issues such as scoring and interpretation of tests. The telephone survey revealed that five of the six school systems contacted provided some degree of supervision by a trained psychologist.

With regard to quality of the psychological evaluations, both principals and psychologists indicated that their opinion of the overall quality of the evaluation process was in the adequate to excellent range, yet principals were not satisfied with the length of time currently needed to complete a psychological evaluation, and both groups indicated that the space in the schools for conducting psychological evaluations was inadequate.

The telephone survey of the six large school systems also showed that there is considerable variability among school districts in how their psychological services programs are operated and assisted in identifying techniques which could be used to improve the evaluation program in Dade County. Of particular interest was the computerized information system used by the Houston School District. This system allows the district to access student information, score tests and write reports in a standard format, while increasing efficiency and minimizing errors. Nevertheless, the differences found among the school districts in the survey underscored the necessity to design a psychological service program according to local needs.

Based on the study's findings, several of the recommendations made for improving the efficiency of Dade County's psychological services program, including an increase in the number of school psychologists, are being considered for implementation. These include 1) revision of the information system used to collect data on all activities related to the delivery of psychological services; 2) establishment of a committee to review the child study team process, with a goal of reducing the number of referrals for evaluation by instituting intervention and prevention strategies in the classroom; 3) diversification of the duties and activities of the school psychologist to allow more time for consultation with school personnel and student counseling, if additional staff are added; and 4) increased technical supervision for school psychologists.

Examples of State and Local Evaluation Studies Pertaining to Previously Unserved and Underserved Handicapped Children

State and local educational agencies have put special emphasis on educating handicapped children who were unserved or underserved before the enactment of the law. These children are given priority in Section 612(3) of EHA-B. Some of these children are preschool and secondary handicapped students; severely handicapped children, including the emotionally disturbed; and handicapped children who require special consideration because of ethnic and cultural differences. Program expansion has been particularly dramatic for certain groups of handicapped children. This growth is characterized by improvements in existing services and by development of entirely new opportunities for children the schools had not served before. State and local educational agencies are conducting evaluation studies to determine the effectiveness of their efforts to educate these children and improve the services provided to them. Among the studies reported this year are investigations related to students exiting from special education programs, students requiring extended school year services, and students with behavioral disorders.

Study to Validate Procedures for Determining Eligibility for Extended School Year Services. As a result of an agreement reached in 1984 between the Office for Civil Rights, the Seattle School District, and the Washington State Office of the Superintendent of Public Instruction (OSPI), OSPI issued regulations requiring all school districts in the State to assess students with handicaps for the need for educational services beyond the 180-day school year. Washington State's regulations are based on the premise that some handicapped students experience significant skill losses over the summer (regression), and fail to quickly regain those skills in the next school year (recoupment). The concept of regression and recoupment also applies to nonhandicapped students, but their rate of loss and relearning is considered normal. If some handicapped students' rate of regression is greater and rate of recoupment is less than normally expected, they may require educational services during the summer to prevent this significant loss. These services would be necessary so that the student has the same opportunity as nonhandicapped students for learning new skills during the 180-day school year.

In attempting to implement this new requirement, the Seattle LEA found no professional standards or guidelines available to assist staff in determining student eligibility for extended school year services (ESY). The Seattle LEA, therefore, undertook a study to develop an empirical base upon which to establish procedures for determining student eligibility for extended school year services. The purpose of the study was to obtain answers to several questions regarding regression and recoupment. First, there was a need to determine whether or not regression and recoupment occur in the regular student population, since the determination of the handicapped student's need for ESY services is relative to what is considered a normal amount of regression and recoupment. In addition, how much regression occurs, how quickly the lost skills are recovered, and when the lost skills are recovered needed to be examined. A second major question was whether or not special education students show regression and recoupment patterns similar to those of regular students. Finally, the major purpose of the study was to determine how much regression and lack of recoupment constitutes a significant loss of skills such that without ESY services, the handicapped student would be unable to reasonably benefit from instruction given during the regular school year.

A multiple, repeated measure, time series design was used with 350 stratified, randomly selected regular education students in grades two, four, six, eight, and 10, and with 420 stratified randomly selected handicapped students. The sample sizes, after attrition, were 296 nonhandicapped and 248 handicapped students. Handicapped students classified within 12 of the 14 State defined categories of handicapping condition were selected and grouped on a functional basis that corresponded to six classroom instructional groupings used in the district (i.e., mildly handicapped, behavior disordered, moderately handicapped, severely handicapped, communication disordered, and hard of hearing and deaf). Regular education group size ranged from 52 to 63 students and special education groups from 33 to 69 students. Tests for regular education students measured cognitive outcomes in reading and math. These students were given short forms of the California Achievement Tests (CAT). All handicapped students were tested on measures related to objectives on their IEPs. For moderately and severely handicapped students, those measures included teacher-designed items on cognitive, language, gross motor, fine motor, and self-help tasks. Short forms of the CAT and the Wide Range Achievement Tests were given to mildly handicapped students and to students with behavior disorders. In addition, students with behavior disorders were given a behavioral assessment.

Tests were administered in June, July, September, October, November, and December, 1984. The test cycles were scheduled so that six weeks elapsed between the June-July and July-September assessment dates for the measurement of regression. Four weeks elapsed between the September to December assessments, representing the recoupment phase. Tests administered to all students were scored and reliability coefficients computed for measures administered to the handicapped students. Regression was defined as the amount of skill loss occurring between June and September. Operationally this was defined as the difference in the percent of items answered correctly in September minus the percent correct in June. Recoupment was defined as the gain in skills occurring in the fall of the school year.

The study determined that nonhandicapped students regressed between June and September on an average of -.3.82 percent on all measures. Recovery of lost skills was 1.70 percent by October 15 and more than completed by November 15, with a 7.44 percent gain in score since September 15. On the basis of these data, the district determined that normal recoupment, on the average, is completed by about November first by nonhandicapped students. To the extent that handicapped students differed from "normal" (i.e., did not recoup skill loss by November first), they would, presumably, require educational services during the summer months to enable them to benefit from the 180-day school year program.

In order to determine cutoff scores for what constitutes significant regression with lack of recoupment, the confidence intervals for the overall difference scores were computed. Since this study was only interested in determining cutoff scores for handicapped students, only data from the tests administered to these students were included in the computation of confidence intervals. Analyses were conducted to establish the size of the interval for June to November difference scores for each type of test administered to the handicapped students. This provided information about how large a difference between June and November would have to be found before it could be determined whether the score was significantly different from "normal" regression/recoupment. Statistics were computed for each grade level, handicapped group, and test type.

The study found that all handicapped students demonstrated patterns of regression and recoupment similar to nonhandicapped students, with the exception of communication disordered students who showed minimal regression on a test of articulation and complete recoupment by October. With respect to the performance of students with communication disorders, the study report cautions that general language development of these students was not tested. The scores of mildly handicapped students were lower than their regular education counterparts, but their overall pattern, rate of regress, and rate of recoupment were found to be similar. For all test types, these students had more than recovered their losses by the November testing. Students with behavioral disorders performed on the CAT in a similar way to nonhandicapped students with the exception of reading comprehension where performance was lower; marked regression on the behavioral assessment was found, and recoupment was slow and incomplete in December. Students in the hard of hearing and deaf group performed almost identically to nonhandicapped students; their overall pattern of scores, rates of regression and recoupment, and performance level were largely the same.

The most significant differences between the nonhandicapped and handicapped groups were found for moderately and severely handicapped students. The moderately handicapped group included students of all ages classified as moderately mentally retarded, and mild to moderately functioning children aged three to six, classified as developmentally handicapped; all children in this group were served in self-contained classes and functioned academically in the range of one-third to two-thirds of their chronological age. Students served in self-contained classes were classified as severely/profoundly retarded, multihandicapped, and developmentally handicapped; these students function at less than one-third of their chronological age and were served in self-contained classes. Not only was the regression of these students found to occur faster, but their recoupment was slower than for other groups of students. In cognitive areas, their recoupment was not complete by December. Of interest, however, was that on speech/language, gross and fine motor, and self-help test items, the recoupment rate of these students was similar to that of students in the regular education program.

The results of this study were used by the district to establish cutoff scores indicating significant regression with lack of recoupment for each group of handicapped students, and for each of several test types (e.g., teacher designed, commercial, criterion-referenced tests; WRAT subtests; behavior assessments; etc.). Subsequent to this study, teachers applied these cutoffs to data collected on all handicapped students in the district. Teachers throughout the district were given guidelines in the spring specifying that they select a minimum of three IEP objectives and measuring devices for each of their students. Students were tested in June, September, and November, and, based on the difference between the June and November scores, were identified for referral to extended school year services for the following summer. As a result of this process, in 1985 approximately 11 percent of the moderately and severely handicapped students served in the district and approximately 1 percent of the mildly handicapped students were referred for extended school year services. No students classified as behavior disordered, deaf or hard of hearing qualified for service on the basis of regression/recoupment. A small number of additional students were referred for extended year services either because they had experienced a significant change in their medical status, or had made no educational progress during the school year. Of the 4,522 handicapped students served in Seattle in the 1985 academic year, a total of 1.26 percent qualified under the regression/recoupment, change in medical status, and no educational progress categories.

A Study to Validate a Statewide System to Follow-Up Students Exiting Special Education. Since 1973, the Michigan School Code has required local districts in the State to collect follow-up data for 1 year on handicapped students exiting special education. In 1986, revisions to those provisions were enacted which require intermediate school districts (ISDs) to describe in their annual plan the procedures used to modify the delivery of special education programs and services based upon that follow-up data. As a 1984 review of 57 ISDs' plans revealed a wide degree of variation among the ISDs in the methods and procedures used to implement their follow-up systems, the Michigan SEA funded a project to analyze the follow-up procedures and prepare recommendations for a more practical and useful approach to Statewide data collection.

The study recommended that the student follow-up process include a student registration form to be completed at the time a student exited a program or service; data collection on a quarterly basis; telephone survey techniques to collect the data; and use of different survey forms for students returning to general education, for students leaving school from special education, and for different categories of disability. It was further recommended that the SEA develop the capacity to analyze ISD data and provide analytic reports to these districts within two weeks to facilitate better use of the data at the local level. Reports would include factors relating to school/community adjustment, specific traits that become predictors of success or lack of success, level of employability by disability, method of exiting special education by disability, and type of program as predictor of postschool adjustment.

In 1986, the Michigan SEA conducted a pilot study of the student follow-up process based upon these recommendations. The primary purpose of the pilot study was to validate a procedure for following up special education students 1 year after they exited programs or services. Eight school districts volunteered to participate in the pilot study to provide initial baseline data relating to their former students, to determine the degree of effort it would take to contact students and collect information, and to provide other feedback as necessary to assist the SEA develop a systematic Statewide plan for data collection and analysis. The approach was validated by these districts through a review of 1,342 former special education students' files and data collection using the telephone survey for 963 of these students. The authors note that while the districts that volunteered to participate in the validation study are representative of districts throughout the State, they were not selected through any particular sampling technique, and, thus, generalizations should be made with caution.

The sample of students in the pilot study included all categories of handicapping conditions, with 38 percent classified as learning disabled upon exiting special education, 37 percent as speech and language impaired, and 14 percent as emotionally impaired. In addition, almost half of the 1,342 students in the sample exited special education by returning to general education (48.8 percent) while 27.8 percent graduated with a diploma, and 6.4 percent dropped out of school before completing their program. For the pilot study, data analyses were not conducted by handicapping condition.

Data obtained from the review of files of all students who exited indicated that the vast majority of exiting students (four out of five) had spent less than half of their time in special education prior to exiting. Only 16 percent were identified as having received any vocational education training, with 12 percent of these being regular vocational education programs. Analysis of data on 174 of the students who returned to general education (excluding speech and language students), revealed that 80 percent were doing "C" or better in general education, and in most cases (82 percent) their behavior and social adjustment was as well or better as compared with other classmates. Further, 45 percent of the students had many friends, got along well without community assistance, and had no continued need for further special education services. However, 64 percent were not likely to participate in extra curricular activities, and 62 percent were not involved in any out-of-school activities.

For 394 handicapped students who exited school, the data indicate that seven out of ten were not currently involved in any type of postschool training program; of the 18 percent who were, one out of three was enrolled in a community college. Further, 68 percent of the students were employed, three-quarters working full-time. Four out of five of the former special education students were living with their family and nine out of 10 were not receiving any other assistance from community or private individuals or agencies, such as a psychologist, a department of social services, or vocational rehabilitation.

While these data would suggest that the students included in the follow-up study seem to be reasonably well adjusted socially, emotionally, and occupationally, it is important to note that the vast majority (75 percent), were classified as learning disabled (38 percent), or speech and language impaired (38 percent), prior to exiting special education. Data relating to the severely impaired students was available only on an extremely limited basis, and detailed analysis was therefore not conducted for that population.

The procedures used to obtain these data were validated through the pilot study and deemed to be reasonable and beneficial. It is anticipated by the State that the data gathered from this process when implemented statewide will be used to improve curriculum, aid in IEP planning, support the transitionary process, develop further interagency cooperation, and provide a base for further decision making, rule revision, and funding.

Conclusion

The Office of Special Education Programs, State Educational Agencies, and local educational agencies as illustrated in this chapter, are rigorously committed to assessing and assuring the implementation and effectiveness of providing all handicapped children a free appropriate public education. Implementation of Federal and State statutes and regulations for educating handicapped children are being monitored on a more continuous, comprehensive basis. However, it is clear that Federal and State capacity to carry out these responsibilities is still being developed and refined. Complementing these Federal and State efforts has been a significant increase in attention to program evaluation. This conclusion is not only based on studies such as those reported in this chapter but the priority and attention States have given to such activities as their joint effort to develop effectiveness indicators for special education being coordinated by the Mid-South Regional Resource Center at the University of Kentucky. The Federal and State compliance monitoring of policy, procedure, and practices coupled with program evaluations designed to assess their effect and impact, provides assurance that future programs and services to handicapped infants, toddlers, children, and youth and their families, based on this administrative vigilance and commitment to program improvement will continue.

A range of studies has been conducted at Federal, State, and local levels to carry out their respective responsibilities to evaluate the impact and effectiveness of special education and related services for handicapped children in accordance with the mandates of EHA-B. These studies contribute to the growing body of knowledge on the impact and effectiveness of special education and related services nationally, and at the State and local levels. The studies conducted thus far have provided information on the implementation of EHA-B, identified effective programs and practices in educating handicapped children, and examined cost-effective strategies for meeting the needs of these children. Studies currently underway promise to further expand this body of knowledge. Yet information is not always shared across levels, although local, State, and Federal educational agencies have mutual interests in assessing the effectiveness of efforts to educate handicapped children.

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APPENDIX A. ABSTRACTS OF STATE EDUCATIONAL AGENCY/FEDERAL EVALUATION STUDIES

ABSTRACTS OF STATE EDUCATIONAL AGENCY/FEDERAL EVALUATION STUDIES

Washington Superintendent of Public Instruction

"Impact and Effectiveness of Categorical Programs for Low Achieving Students."

Project Director: Jane Dailey

Cost:	Federal Share:	$136,979
	SEA Share:	$105,364
	Total:	$242,343

Project Period: October 1, 1986 to March 31, 1988

Abstract:

The Washington Superintendent of Public Instruction will evaluate three distinct aspects of curriculum based assessment. First, the study will evaluate the effects of curriculum based assessment versus norm referenced procedures for determining categorical eligibility. Second, variables will be defined which distinguish categorical programming from standard programming received in the regular education setting. Third, the study will measure the long term impact of categorical programming on a student's career.

The curriculum based assessment study will compare types of students found eligible for three categorical programs (special education/learning disabilities, Chapter I/disadvantaged, and the Remedial Assistance Project) based upon typical norm-referenced assessment versus curriculum based assessment. Data for all elementary-aged students referred for assessment for any of the categorical supportive programs will include student gender, age, ethnicity, referral variables, academic programming, intensity of services, and ability and achievement test scores. The data generated by the curriculum based assessment study will be adequate for establishing functional guidelines for determining student eligibility within regular settings of categorical programming.

The categorical guidelines study will utilize an observational device to determine the parameters of acceptable categorical programming. The evaluation will study the distinction between categorical services and regular services which are supplemental and therefore qualify for additional funding. The final outcome will not only be measured in terms of student performance but also in terms of

independent variables of enhanced services. Data collection will take place three times by three different sources (two advisory teams and a local site team) in three classrooms in the three district test sites. The selected classrooms will be serving the target populations in regular settings (not pullout programs). Interrater agreements and covariance between the three sets of data on each classroom will be analyzed.

The student evaluation/monitoring study will generate data on the longterm impact of categorical programming on a student's school career. Study findings will be responsive to the following concerns: Do students who receive special instruction in the regular classroom perform higher on academic and social measures in the subsequent academic year as compared to similar students who received pullout instruction? What is the impact of special instruction in the regular classroom or pullout programs meet high school graduation requirements? Are these students employed after graduation from high school? The student evaluation system for data collection will be implemented in all three districts and will utilize existing data typically collected in the district. Additional data will include demographic and program variables, achievement data, behavior ratings, and post-school placements. All students being served, or who have been served, by the target categorical programs will be included in the sample.

Nebraska Department of Education

"Evaluation of the Impact of Special Education Services on Moderately and Severely Handicapped Individuals."

Project Director: William MacKay

Cost: Federal Share: $110,000

SEA Share: $ 76,590

Total: $186,590

Project Period: October 1, 1986 to March 31, 1988

Abstract:

The Nebraska Department of Education will study the impact of special education services on the post school success of trainable mentally retarded adults. The components of post school success and the factors influencing success will be investigated. The study methodology utilizes a qualitative case study of 60 mentally retarded individuals, selected from five sites across Nebraska, to assess their present level of post-school success. Data will be gathered on the family, community and education system characteristics, and the factors in these individuals' lives which may have influenced that level of success. The sample will be selected from the Trainable Handicapped Adults in Nebraska who fall into either of two age categories: Granduated from Special Education in the last three years or graduated prior to the 1973 implementation of the Nebraska Special Education Legislation.

A general survey methodology will generate quantitative data on broader program and community characteristics as well as process variables relative to the educational program. The survey sample will consist of 120 mentally retarded individuals randomly selected from the initial five sites. Data for collection regarding the school setting will include the type of intervention used, the method of arriving at decisions regarding individual student programming and the overall curriculum, and a measure of post school success. Community characteristics for investigation include the employment level, the availability of other agency support, and variations in types of living and employment opportunities in the community. Data generated by the general survey will supplement the case studies and provide information both on the impact of state and federal legislation on handicapped individuals and the factors which seem to influence this impact.

Florida Department of Education

"Evaluation of the Impact and Effectiveness of Recent Changes in Florida's Graduation and Competency Test Standards on the Educational Opportunities Provided Handicapped Students."

Project Director: Lynn Groves

Cost: Federal Share: $115,000

SEA Share: $ 76,670

Total: $191,670

Project Period: October 1, 1986 to March 31, 1988

Abstract:

Legislative changes in high school graduation requirements in the State of Florida have created a variety of educational reforms which may affect the success of handicapped students at the secondary level. The legislation emphasizes student academic requirements for earning high school credits and a high school diploma. The Florida Department of Education will study the programmatic and student outcomes resulting from implementation of these legislative requirements.

The evaluation examines state and local educational agency accomplishment of intended outcomes resulting from state legislative changes, and the extent to which implementation of the intended methods and processes of the newly established programs are occuring. Finally, through policy analysis and synthesis of the collected evaluative data, study results will include recommendations concerning appropriate structuring of secondary programs for handicapped students.

The study methodology utilizes both quantitative and qualitative strategies for data collection and analysis. A quantitative analysis of historical data provides the basis for making judgements about the scope and breadth of benefits and problems for handicapped students surrounding the implementation of legislative changes. This analysis includes examination of patterns in changes resulting from implementation, patterns in drop out rates, and the ratio of graduates by type of diploma to the number of handicapped students in secondary programs. The qualitative analysis generates composite case studies depicting various student decision options that are available and the ways in which changes in requirements and competency testing programs have impacted on these options. The data collection procedures include observations, interviews, and surveys of the perceptions of key informants and stakeholders in exceptional, regular, and vocational education.

The study will provide clarification of the status of secondary education programs for handicapped students and their inter-relationships with avenues for attaining certification of competence that lead to gainful employment and personally rewarding living patterns.

North Carolina Department of Public Instruction

"Investigation into Measurable Behavioral Change in Behaviorally/Emotionally Handicapped Students as it Relates to the Provision of Instruction in Alternative Behaviors."

Project Director: E. Lowell Harris

Cost: Federal Share:	$ 37,312
SEA Share:	$ 25,231
Total:	$ 62,543

Project Period: September 1, 1986 to February 29, 1988

Abstract:

The North Carolina study evaluates the effects of Instruction in New Behavior, a behavior targeting and curriculum development system, on behavioral change of Behaviorally/Emotionally Handicapped (B/EH) students. Instruction in New Behavior involves the identification of target behaviors for individual students, the teaching of appropriate alternatives to inappropriate behaviors at awareness, understanding, and application levels, and the identification of progress towards the transfer of new behaviors in general settings.

Both the experimental and the control groups consist of 180 identified B/EH students randomly selected from 72 service delivery centers. The levels (elementary, middle and secondary), the delivery systems (self-contained and resource) and the demographic areas (urban, suburban and rural) offer a comprehensive representation of the demographic areas, levels, and delivery systems in which students in North Carolina are served.

All service providers in the experimental centers will instruct B/EH students in new behaviors based upon the strategies presented in "Instruction in New Behaviors". Service providers in the control centers will not provide the same instruction. Change in behavior will be measured by comparing intensity, frequency and duration scores of students who have participated in the curriculum with students who have not received this instruction. For students in experimental settings, additional data will be collected regarding instructional time required for mastery of new behaviors at awareness, understanding and application levels.

Minnesota Department of Education

"The Impact and Effectiveness of Entrance and Exit Criteria for Special Education Programs in Minnesota."

Project Director:	Thomas Lombard

Cost: Federal Share:	$121,932
SEA Share:	$ 83,698
Total:	$205,630

Project Period:	October 1, 1986 to March 31, 1988

Abstract:

The Minnesota Department of Education will investigate the impact and effectiveness of local entrance and exit criteria for six special education program areas: Learning disabilities, mild mental handicaps, moderate-severe mental handicaps, emotional/behavioral disorders, physical handicaps, and other health impaired.

A comparison of school districts that use the SEA recommended criteria with districts that use locally designed criteria will generate information on differences in subjectivity, usefulness for developing instructional programs, inclusion of inappropriate practices, and the technical adequacy of assessment practices.

The proposed study will evaluate current practices and possible alternatives which could result in greater specification and homogeneity in each of the six program areas. The project will demonstrate and describe the differential effects resulting from the application of various entrance and exit criteria. Using a sample of recently referred handicapped children, the study will determine the effectiveness of SEA and LEA criteria to place students in various educational program options.

A descriptive analysis of information collected from interviews with special education staff will describe the influences on regular education practices resulting from various entrance and exit criteria, and assist districts in determining appropriate interface between regular and special education.

Minnesota Department of Education

"The Impact and Effectiveness of Occupational Therapy Services in Special Education Programs."

Project Director: Thomas Lombard

Cost:	Federal Share:	$ 81,688
	SEA Share:	$ 54,999
	Total:	$136,687

Project Period: October 1, 1986 to March 31, 1988

Abstract:

The Minnesota Department of Education will investigate the impact on educational and non-educational gains of students with learning disabilities (LD), emotional/behavioral disorders (EBD) and mild mental handicaps (MMH) who receive occupational therapy as a related service versus similar students who do not receive occupational therapy.

The experimental group consists of students receiving continuous provision of occupational therapy services. Educational gains will be measured by administering a curriculum based assessment to a sample of approximately 30-50 handicapped students assigned to elementary LD/EBH/MMH programs.

Students progress will be measured by a time series analysis at biweekly intervals on IEP goal areas. The control group consists of students not receiving these same services. Gains in academic performance over time will be compared with focus on the differences between the group receiving special education only and the group receiving special education and occupational therapy services.

The non-educational areas for measurement are in self-concept, fine motor skills, gross motor skills, sensory integration, tactile defensiveness, self-help skills, communication skills, activity level and on-task behavior. Data will be collected on LD, EBD and MMH students receiving occupational therapy. The results of the study will compare the two groups in the non-academic areas and identify group differences attributed to receipt of occupational therapy services.

Iowa Department of Education

"Relevant Educational Assessment and Interventions Model."

Project Director: Jeffrey Grimes

Cost: Federal Share: $120,992

SEA Share: $138,760

Total: $259,752

Project Period: September 1, 1986 to February 29, 1988

Abstract:

The Iowa Department of Public Instruction will investigate the impact of pre-referral interventions designed for students with learning and/or behavioral problems who are referred, or about to be referred, to special education by regular classroom teachers.

The prereferral interventions are based upon a Behavioral Interventions Model adopted for this investigation. The Model consists of three techniques: Behavioral consultation, curriculum based assessment, and referral question consultative decision making. The fundamental feature of these techniques is to change the initial question considered in addressing referral concerns. Frequently, the initial approach to referral concerns is to consider if the handicapped student can be classified as handicapped. In contrast, the initial referral question in the Behavioral Interventions Model is to ask what can be done to modify the regular classroom to produce greater success in learning or more appropriate social behavior.

School psychologists, school social workers and special education consultants in the 15 intermediate educational units responsible for special education and related services to all school age children in the State of Iowa will apply new skills in prereferral interventions. The interventions consist of using one or more components of the Behavioral Interventions Model. The evaluation will focus on three levels of possible effects resulting from application of the interventions: (1) change in how related service professionals view the referral concerns, (2) outcomes with students in terms of resolving the learning and/or social behavior problems, (3) teacher reactions to the prereferral interventions, and (4) system effects.

Influence on how related service professionals view the referral concern will be assessed by the degree to which school psychologists, school social workers and special education consultants apply the components of the Behavioral Intervention Model to assess the referral problem. Student effects will be assessed by the analysis of data generated on the nature of initial referral

concerns, behavioral definitions, interventions utilized to resolve the problem within a regular classroom, and the success or failure of that intervention. System effects will be evaluated by analysis of the numbers of students referred, nature of referrals, the proportion of referrals resulting in preplacement evaluations, and the proportion of students for whom preplacement evaluations result in special education placement. Data concerning the reactions of teachers who have referred students will be collected on initial teacher satisfaction with an alternative form of service, and at follow-up several months after the interventions have been discontinued.

Study results will provide usable data concerning the effects of behavioral interventions applied by related service personnel to students experiencing learning and behavioral problems in regular classroom settings. Implications of study results will address how related service personnel apply interventions, criteria to determine effectiveness of services, and use of related service personnel to assist regular educators in designing interventions for application in regular education settings.

Hawaii State Department of Education

"A Study of the Impact and Effectiveness of Related Services in Producing Desired Student Outcomes."

Project Director: Robert McClelland and Glenn Hirata

Cost: Federal Share:	$151,094
SEA Share:	$102,755
Total:	$253,849

Project Period: October 1, 1986 to March 31, 1988

Abstract:

The Hawaii Department of Education will assess the effectiveness of related services in producing desired student outcomes by investigating the comparative effects of individual versus group speech/language therapy, direct versus indirect (consultative) occupational, physical, and speech/language therapy, and by determining the level of progress of students receiving occupational therapy and physical therapy in an educational setting. The study will also assess the type and number of special education students who require mental health services but have not been served, the particular services they require, and current resources available or required to provide services.

The comparative effects of group versus individual speech/language therapy services will be investigated by administering standardized and non-standardized tests to measure student progress in individual and group settings. Seventy learning impaired, learning disabled and mildly retarded pre-school and elementary students, ages 4 - 12 receiving individual therapy, and 70 matched students receiving group therapy comprise the study sample.

Evaluation of the impact of indirect versus direct services provided by occupational therapists, physical therapists, and speech/language pathologists will generate information on effective methods of providing service, and assist in clarifying which students are most likely to receive benefit from consultation services. The methodology utilizes a survey of all speech pathologists, physical therapists and occupational therapists to determine if students receive consultation or direct services. Information gathered from speech/language/hearing statistical reports and physical therapy/occupational therapy monthly logs are used to compile profile characteristics of students who receive consultative services. The evaluation will study information gleaned from adaptive behavior scales, functional skills checklists, and expressive and receptive language tests to investigate the progress of 50 students receiving occupational therapy, 50 students receiving physical therapy, and 125 students receiving speech/language therapy. A random

sample of 10 occupational therapists, 10 physical therapists and 50 speech pathologists as well as parents and teachers of students previously sampled will be surveyed to compare perceived effectiveness of consultation and direct services.

An examination of the impact and effectiveness of physical therapy and occupational therapy in producing desired student outcomes in learning disabled, learning impaired, moderately retarded and severely multiple handicapped students will generate information concerning which students benefit most from physical therapy and occupational therapy. A basic skills inventory and behavioral checklist will be completed for a randomly chosen sample of 180 learning impaired, learning disabled, moderately retarded, and severely multiple handicapped students receiving physical therapy and occupational therapy services. This information will be gathered near the beginning of the school year and one calendar year later. Gain scores will be calculated and compared across handicapping conditions. Weekly charts completed by physical therapists will indicate student progress along specific variables. Surveys of parents and students' teachers will indicate student progress in therapy over the course of one year.

The investigation of the nature and extent of special education students in need of mental health services will utilize a needs assessment survey of a sample of 400 special and regular education teachers in Hawaii to identify the number of special education students requiring mental health services, the number currently receiving such services, the types of services needed, and staff currently available to provide services. A second needs assessment survey will be administered to a random sample of 100 principals and 100 school counselors who will provide estimates of (1) the number and types of special education students requiring mental health services, (2) the types of mental health services required by those students, (3) resources currently available, and (4) additional resources needed to provide mental health services.

Abstracts of State Educational Agency/Federal Evaluation Studies Program Cooperative Agreements for FY 85

New York State Education Department

"Evaluation of the Effects of New York State's Instructional Program Options, Support Services, and Procedures Used Prior to Referral for Special Education and Upon Declassification from Special Education."

Project Director: Stephen Brown

Cost: Federal Share: $119,870

SEA Share: $ 82,164

Total: $202,034

Project Period: November 1, 1985 to April 30, 1987

Abstract:

The proposed evaluation will determine the availability of instructional program options and support services for students who are experiencing learning difficulties and who are not succeeding in regular instructional programs. The study will determine the relationship of these program options and services to the number of students who are being identified as handicapped and in need of special education programs and related services.

By comparing schools that provide and use a variety of program options and support services for students before they are referred to special education with schools that do not provide or use such services, the study will determine if and how the provision of instructional options and services within regular education affects the number of students in special education.

Regular education classroom teachers selected in the sample will be interviewed and asked to respond to case study examples, as follows:

(a) Utilization of IPDs and SSs.

(b) Which IPOs and SSs have they used with any pupils within a given time frame (e.g., within the past school year), and what were the outcomes in each case.

(c) Select or rank those they believe would be most helpful to children with learning problems.

(d) Identify those indicators (cognitive and behavioral) that suggest a student has a learning problem and the processes (formal and informal) they would use to obtain assistance or support.

(e) Have any of their students obtained IPOs or SSs privately or out-of-school?

(f) Regarding class registers, what number of pupils transferred into or out of the class within a given time frame; what are the reasons for pupils moving in or out of class; what number of pupils are referred to COH and the outcome of such referrals.

(g) With the use of a standardized "case study" technique, teachers will be provided with a capsule description of three pupils with learning problems of varying degrees of severity. (SEA project and inkind staff will devise brief descriptions of nine pupils, three for each of three scales tailored to the characteristics of three grade categories: elementary, middle, and high school). Teachers will be asked which, if any, IPOs or SSs they would recommend for each of the three case study pupils, and which of the pupils, if any, they would refer to COH for evaluation.

Special education teachers selected in the sample will be interviewed to identify which IPOs and SSs are available and describe the processes and factors involved in declassification of students from special education.

North Carolina State Department of Public Instruction

"Investigation of the Effectiveness of the Pre-referral and Intervention Model in the Referral of Learning Disabled and Behaviorally/Emotionally Handicapped Students."

Project Director: E. Lowell Harris

Cost: Federal Share: $ 16,939

SEA Share: $ 12,630

Total: $ 29,569

Project Period: October 1, 1985 to March 31, 1987

Abstract:

The proposed evaluation will investigate the effectiveness of the North Carolina pre-referral and intervention model in terms of cost, time, referral appropriateness, and impact of training models.

North Carolina regulations for determining Learning Disabilities and Behavioral/Emotional Handicaps were revised in 1985. The revised regulations now require two levels of documentation for the identification of students with these handicapping conditions. In the two-level intervention process, the first level of identification is carried out by the classroom teacher prior to developing a pre-referral, and the second level of intervention is recommended by a school support/assistance/ intervention team after a pre-referral has been submitted. The second level of intervention is carried out by the classroom teacher and the results are analyzed by the team in determining whether a referral for special education assessment should be submitted. At present, North Carolina does not have the data to determine whether the model is effective. The data collected and analyzed through this project will provide the answers to the question of effectiveness.

Twenty-four schools of elementary level (K-8), junior high/middle level (7-8/9) and senior high level (9-12) will be selected to participate in the project. Two schools in each of these three levels will be selected to receive one of four forms of training: 1) on-site training of assistance/intervention teams, 2) training of all classroom teachers and assistance intervention teams, 3) video tape training of all classroom teachers and assistance/intervention teams (tapes made from training above), and 4) no training. Twenty-four data collectors (one per school) will be trained to use the pre-referral (Focus of Concern) form, the support/assistance/intervention team record, and student assessment/ placement records to identify information to be transferred to the coded data collection form. Anticipated pre-referrals submitted to the support/assistance intervention

teams will be approximately between 70 and 90 per school. Therefore, data from approximately 1,680-2,160 pre-referrals will be analyzed to investigate 1) the impact of academic and/or behavioral intervention procedures on frequency of specific presenting problems, frequency of pre-referrals resulting in special education assessment, and frequency of verification of handicapping condition; 2) the impact of each of four training models upon teacher and support/assistance/intervention team intervention efforts; and 3) whether assistance is received faster through pre-referral/intervention or through direct referral, and if assessment costs of inappropriate referrals are reduced.

The data analyzed through this project will be used to answer such questions as:

1. Do teachers and students receive assistance within fewer school days through the pre-referral procedure than through the direct referral procedure?

2. Does the training of regular classroom teachers in intervention strategies affect the choices of interventions employed prior to submitting pre-referrals?

3. Does the training of regular classroom teachers in intervention strategies affect the frequency with which pre-referrals are submitted?

4. Does teacher training in intervention strategies affect the frequency of inappropriate (not verifiable) referrals?

5. Does there appear to be a relationship between teacher training and "presenting problems" identified on the pre-referral?

6. Does there appear to be a relationship between "presenting problems" and verification of handicap or referrals made?

7. Does the declassified (previously identified handicapped) student continue to present problems for the classroom teacher?

8. Does there appear to be a relationship between race, school level and race, sex, frequency of pre-referred, or appropriateness of referrals?

Frequency distribution tables and comparative tables will be used to report the findings of the project.

Maryland State Department of Education

"An Investigation of Program Characteristics that Enhance Handicapped Students' Performance on the Minimum Competency Test."

Project Director: David Hayden

Cost:	Federal Share:	$105,743
	SEA Share:	$ 72,700
	Total:	$178,443

Project Period: October 1, 1985 to March 31, 1987

Abstract:

The Maryland State Department of Education will evaluate the effectiveness of schoolwide and individual program options offered to handicapped students that enhance these students' ability to pass the Maryland Functional Reading Test (MFRT) and document the educational decisions made for these students subsequent to passing or failing the MFRT.

The evaluation study is guided by the general purpose statements of: (1) documenting and describing existing program supports available to handicapped students in preparation for taking the Maryland Functional Reading Test; (2) determining the effectiveness of these program supports as measured by handicapped students' performance on the MFRT; and (3) identifying what program decisions are made subsequent to a student passing or failing the MFRT.

To provide necessary information, the evaluation study must answer the following questions:

1. What are the statewide performance trends of handicapped students served in Levels I-IV who take the MFRT?
2. What schoolwide and individual program modifications are made available to handicapped students to prepare them to take the MFRT?
3. Which of these program modifications relate to handicapped students' successful performance on the MFRT?

The overall plan to address these questions consists of three levels. At the first level, existing performance data on all handicapped students who took the MFRT will be analyzed to determine trends in students' performance by level of service, handicapping condition, and school type.

At the second, a sample of no fewer than five LEAs representing the major geographic and demographic features of Maryland LEAs have been selected for investigation of school program features. At the last level, a sample of ninth grade level I-IV students who will take the MFRT for the first time in October, 1986 will be selected from within the five LEAs for indepth examination of individual educational programs provided during their eighth grade year as well as intensive remedial programs immediately prior to taking the test. These same students will be followed up in their tenth grade year to determine what changes have been made to their educational programs and to determine if a relationship exists between modification and passing or failing the MFRT.

Data at levels two and three will be analyzed separately to first determine trends in program delivery. Then these data will be analyzed, using the sample students' Pass/Fail score on the MFRT as the criterion to determine which schoolwide (eight grade programs) and individual program features relate to student performance. The project will identify trends in handicapped students performance on the MFRT for school years 1982-83 to 1984-85; document and describe programs and services available to handicapped students in middle and junior high schools that address the MFRT goals; identify which of these programs relate to passing the MFRT; and, identify modifications in individual education programs made for students based on their performance on the MFRT.

Kansas State Department of Education

"Evaluation of Identification and Preassessment Procedures in Kansas."

Project Director: Sidney A. Cooley

Cost: Federal Share: $118,929

SEA Share: $ 80,638

Total: $119,567

Project Period: November 18, 1985 to May 17, 1987

Abstract:

The proposed evaluation will (1) assess the effectiveness of new State guidelines for determining eligibility and placement of students in the areas of learning disabilities, behavioral disorders, and speech/language impairment; and (2) assess the effectiveness of instructional programming options and screening procedures used prior to referral for placement of children in special education which have recently been mandated by State regulations as "preassessment" procedures.

With regard to the latter, State regulations (Kansas Administrative Regulations, 1985) require that, before a student can be referred for evaluation, (a) he or she be presented with learning experiences within the regular education setting appropriate for his or her age and ability; and (b) it be determined that his or her potential for learning has not been achieved in that regular education environment. A preassessment team is to be formed in each building to gather existing data, observe the student, and then make recommendations for modification of the regular educational environment in order to present the student with appropriate experiences for his or her age and ability. The team is also to provide technical support and evaluate the efforts of regular education to meet the child's needs. Only after it has been documented that a student cannot be educated within the regular education setting can the student be referred for evaluation of a handicapping condition.

With regard to the former, the project is working under the assumption that only through indepth case studies of a large representative sample of both students identified as handicapped, and referred but not found to be handicapped, will it be possible to determine the effectiveness of the new guidelines and screening procedures.

Seven sites, representing over 10 percent of the local educational agencies, will be solicited for an indepth case study/interview of the identification process in the three categorical areas (learning disabilities, behavioral disorders, and speech/language).

Rural areas, mid-sized towns, urban areas, and suburban areas will be included as sites. The sites will also include the LEAs that have incidence rates at, above, and below the State average. Cases will be selected in each of the three areas of special service being studied at the primary, elementary, junior-high, and senior-high level. Both cases in which handicaps were identified and those in which the student was referred but not determined to have a handicap will be examined.

Two types of data will be collected during the site visits. The first will be data from an extensive review of the student's files. The tests and behavioral rating scales used will be evaluated for their appropriateness, reliability, validity, and norms. Test protocols will be reviewed for correctness of administration and scoring. Observational data will be reviewed to determine if it was relevant, made under several different conditions, made by a trained observer, and made in a systematic manner. Other data, such as attendance records, grades, vision and hearing screening records, parent and teacher interviews, and medical/health records will be examined to determine if they were relevant. Recommendations made by the preassessment team will be evaluated to see if they were appropriate for the given student. The second type of data collected will be obtained through both structured and open-ended interviews of preassessment and multidisciplinary team members and administrators. The type of information gained from these interviews will include the philosophy of the LEA and the individual personnel interviewed; actual identification practices; level of administrative support and leadership; how structured screening, preassessment, and evaluation procedures are carried out; how closely preassessment and identification guidelines are followed; how the interviewers interpret the various guidelines; how valuable the interviewers found the data in the student files with regard to decision making; what and how effective were teacher interventions (programming options) made before and as a result of preassessment; and were handicapping conditions other than the referred one considered.

Data collected from the two procedures will be used to determine (1) what and how were the efforts made to meet the preassessment processes; (2) what data were considered during evaluation; (3) what is the philosophy of LEA and individual staff members with regard to identification; (4) differences in philosophy, screening, and assessment procedures which led to different incident rates; (5) differences in the interpretation and implementation of the new identification guidelines and preassessment procedures. The results of the study will be used to revise State regulations and guidelines and to identify areas in which technical assistance is needed.

Louisiana State Department of Education

"Evaluation of Eligibility Criteria and Program Options."

Project Director: James Canfield

Cost: Federal Share:	$ 95,942
SEA Share:	$ 68,050
Total:	$163,992

Project Period: October 1, 1985 to March 31, 1987

Abstract:

The proposed evaluation will focus on (1) the impact and effectiveness of criteria used to determine eligibility and placement for students in various program options and (2) the effectiveness of instructional programming options and screening procedures used prior to referral for placement of children in special education.

An analysis of selected facets of the pre-referral stage will be carried out by examining the original referral statement of the teacher and extracting from this statement the list of attributes for each child, numbering about 800. These will be plotted by age, by handicapping condition, or by placement/no placement recommendations. The results allow for a determination of the extent to which the different attributes listed by the teacher fall into different categories or placements. Written reports and files relative to the recommendations and interventions at this prereferral stage will be examined.

The possibility of contamination exists relative to the judgments made at this stage concerning further referral and appraisal. It is possible that some standardized tests are administered at this stage and they affect the decision to recommend further appraisal. In effect, it may not be the intervention per se that influences the decision to conduct further assessment. It may be that test data indicate this child may or may not meet criteria and so no further appraisal is recommended. The child may still have major problems. Accordingly, the follow-up component of a sample of these children is needed for this endeavor. The components of this phase will be plotted.

A brief Likert-Type scale will be developed to assess teacher reaction to the prereferral process. This will deal with such factors as the extent to which they feel their input is important, the effects of the collaborative effort at this stage and the impact they feel this has upon the children. The scale will be administered to a sample from across the three school systems. Teachers at each grade or subject area will be included.

An analysis of appraisal and placement procedures and recommendations will be carried out by examining the school records of 100 handicapped children at each age level 6 through 14. All three target samples will be included in proportions represented within the samples of the school districts. The instruments used to appraise each child will be entered into a list by age, type of handicap, school, and school district. The technical adequacy of the instruments will be examined. This will be completed by examining the manuals for statements of norms, samples, reliability and validity procedures. Comparison between existing analyses will be undertaken. If there exists a significant number on which no reviews are available, the project will constitute a consultant pool and have these experts examine the instruments for technical adequacy. Patterns of use by age and other parameters will be studied.

Data on samples of identified handicapped children will be collected and then analyzed via different rules. The subjects for this component of the inquiry will be 60 learning disabled, 60 mildly retarded, and 60 behaviorally disordered/emotionally disturbed children at age 8 and at age 12. These ages are selected because instrumentation is generally technically adequate for these ages.

A comparison will be made between children who are referred for special education and those who are not. The study is limited to 60 children at age 8. The basic question herein relates to the number of those not recommended for referral who are judged in need of special education in contrast to the number of those recommended for referral who do not meet the criteria. From this it should be possible to test the validity of the prereferral decision to recommend or not to recommend special education appraisal. It might also show the validity, or lack of, for teacher referrals or the prereferral intervention process.

An analysis of learner attributes and instructional recommendations will be carried out by compiling a set of learner attributes as listed in the teacher referral and formal appraisal and matching these to the set of instructional recommendations. Interrater reliability for the procedure will be established by having three codes rate a common sample of 20 protocols. Consistency of instructional divisions across these attributes will be assessed. A determination of the extent to which teachers make curriculum adjustments, based upon statements of present levels of functioning and/or instructional adjustments based on learner attributes, will be made by collecting assignments and instructional materials that are used by 30 individual children (at ages 9, 12, and 15) and by contrasting these with present levels of functioning to determine curriculum match. That is, a child in the 7th grade with a 3rd grade reading level would seem to be mismatched between statement of present level of functioning and the curriculum level of materials. Collections of actual work samples and tests will provide information relating to the instructional adjustments. Teachers of the above specified children at ages 9, 12, and 15 will be surveyed relative to the types of adjustments made on behalf of the children.

An analysis of the relationship between teacher's subjective judgement of children and appraisal practices will be carried out by using statements from teacher referrals delineating learner attributes. These will be coded into behavioral or task only terms (e.g., does not provide the correct oral response to written words) for separate content listings (e.g., science). Summary analyses will be undertaken. It will be possible to examine teacher judgments of learner performance across ages and handicapping condition and to differentiate the effects of content or knowledge upon task or behavior. Specific attributes specified in the teacher referral across the tests and other instruments utilized in formal appraisal will be tracked. The technique requires an analysis of the interaction that takes place between examiner and child across each item or each set of items in the appraisal process. These are coded to over 100 major instruments and to some 1,000 subtests within these. The study will make a comparison between quality of performance and quantity, the latter being scores obtained on instruments during appraisal. Two approaches will be employed. The first will involve 30 mildly retarded and 30 learning disabled children with standardized reading scores at or above the second grade level. A sequence of science readings will be selected at each grade level from first through about fourth or fifth. This will establish a basal level and a ceiling. Each reading will be 100 words in length and the child will be requested to read each from the beginning through a level at which 20 percent or more errors are made. Comparisons will then be made between quality of performance (i.e., the number of words correctly read; the number of questions actually answered; the number of words defined within the context of the paragraph) and placement level of the standardized test. The second approach will be to contrast the types of reading rules (e.g., effect of two consonants together on pronunication) in both the standardized test and the content reading.

An analysis of the success/failure/status of the child will be carried out by two procedures. The first procedure will involve the collection of school marks, pupil progression status and the results of State tests on the 100 children at each grade level who comprise the historical sample. The results of these will be compiled and analyzed to determine degrees of success or failure. Three samples of school work will be collected. These will consist of any written classroom assignments for Wednesday and Friday of a six week period in the fall of the year. The subjects for this will include the children at three different age levels. This will include homework assignments that are handed in on those days and any tests administered by the teachers. All additional data such as school marks, progression, and State test results will be included.

Texas Education Agency

"State Education Agency/Federal Evaluation Studies Program."

Project Director: Helen Ferguson

Cost: Federal Share: $115,887
SEA Share: $ 77,258
Total: $193,145

Project Period: October 1, 1985 to March 31, 1987

Abstract:

The Texas Education Agency will conduct an evaluation in two areas: (1) evaluation of the referral process involving students who are experiencing learning problems and who are not succeeding in the regular instructional program, including the formative process that occurs before a teacher decides that a student cannot be taught in the regular classroom program and from which emerges a teacher's judgements about the student's teachability, and (2) evaluation of the appropriateness, technical adequacy, and validity of current assessment practices in relation to decisions about eligibility, intervention, and placement of ED students in various program options.

The evaluation will consist of three studies. The first is a validation study of a teacher questionnaire to be used as a screening device for students referred for comprehensive assessment as being possibly learning disabled. The Texas Education Agency Task Force on Emotional Disturbance has developed three approaches to the identification of emotional disturbance based on the DSM-III, a clarification document for the definition of emotional disturbance found in 34 CFR 300.5(b)(8), and a behavioral systems approach that uses a behavioral evaluation scale. The second study of this project is a preliminary study of the technical adequacy of these three different approaches. Respondents to the study consist of both private consultants and school district employees. The respondents will analyze case studies of students currently identified and served under another handicapping condition, and students assessed and found to be ineligible for the following purposes:

(1) to assess the technical adequacy of the DSM-III's ability to identify emotionally disturbed students reliably (i.e., interrespondent agreement with diagnoses and determinations of emotional disturbance for selected case studies) and

validity (i.e., agreement among respondents with original determinations of emotional disturbance for selected case studies);

(2) to determine any increased costs and related benefits associated with the use of the DSM-III in the identification of emotionally disturbed students; and

(3) to determine whether a teacher rating scale based on behaviorally defined criteria, such as the Behavior Evaluation Scale (BES) (McCarney et al., 1983), contributes significantly to the accuracy of identifying students as being emotionally disturbed.

The third study is to field-test the classification systems refined in the preliminary study, the DSM-III, behavioral systems criteria, and the Federal definition of emotional disturbance regarding (a) costs and efficiency, (b) reliability, and (c) validity; and to develop recommendations for the commissioners and boards of the Texas Education Agency and the Texas Department of Mental Health-Mental Retardation regarding the use of classification systems in the identification of emotionally disturbed students as eligible for special education instruction and related services.

Maryland State Department of Education

"An Evaluation of the Effectiveness of Services for Preschool Handicapped Children."

Project Director: Sheila Draper

Cost: Federal Share: $127,176

SEA Share: $111,022

Total: $238,198

Project Period: October 1, 1985 to March 31, 1987

Abstract:

The proposed evaluation will provide information about the long- and short-term effectiveness of early intervention for handicapped preschoolers. Specifically, the outcomes of this project will be the answers to the following questions:

(1) What are the short- and long-term effects of early intervention for handicapped preschoolers aged birth to five?

(2) What kind of children make the most progress in intervention over the short- and long-term?

(3) What factors are associated with the greatest gains in intervention?

(4) Does participating in a preschool program have an impact on the handicapped child's family and is there a relationship between impact on the family and child progress?

(5) Are parents satisfied with their handicapped preschooler's program and how does parental satisfaction relate to child progress?

(6) Are educational services being provided to handicapped children in the most effective manner possible?

This Preschool Evaluation Project was initiated by the State of Maryland in September 1983, for the purpose of creating a longitudinal data base of handicapped preschoolers. Thus far, the Project has collected the following kinds of information on two cohorts of handicapped preschoolers who are new to special services in Montgomery County:

- developmental assessment prior to the initiation of special services;
- developmental assessment at the end of each school year;
- child demographic information;
- documentation of the type and quantity of services received;
- initial and end-of-the-year assessment of family characteristics; and
- parental satisfaction data.

In the first year of the project (1983-84), 124 handicapped preschoolers were pre- and post-tested. In the second year, another 350 new children were pretested. Two hundred and sixty-one of them, along with the first year's children were post-tested at the end of the school year. Major activities to be implemented through this current project will be continuation of the aforementioned data collection to answer the questions indicated; analysis of the data collected during the second school year of the project; addition of information on a third cohort of children to the data base; analysis of the three years of data to provide efficacy information; collection of cost data for four school years, and comparison of program effectiveness indicators with cost figures.

The evaluation is designed to be a longitudinal prospective study of children who receive special services before they start elementary school. The children's developmental status in seven areas is tested before they enter services and at the end of each school year until they reach their sixth birthday. These data will be analyzed using a technique called "value-added" analysis to see whether or not the children's growth exceeded that expected based on their preservice status. The extent of growth due to program participation will be analyzed by handicapping conditions to examine differential growth patterns among different types of children. Program factors will be related to extent of growth in a regression analysis to identify those circumstances under which children made the most gains. Changes in family characteristics and degree of parental satisfaction will be analyzed and are related to extent of child gain due to program participation by regression. Finally, the data on program effectiveness will be compared to the cost incurred to serve the children in the sample to determine whether or not handicapped preschoolers are being served in the most cost effective manner possible.

Maine Department of Education and Cultural Services

"Transition Programs for the Handicapped: Impact and Effectiveness."

Project Director: Richard Bartlett

Cost: Federal Share:	$ 99,944
SEA Share:	$ 75,725
Total:	$175,669

Project Period: January 1, 1986 to June 30, 1987

Abstract:

The project will conduct a comprehensive, Statewide evaluation of transition programs and services. This activity will begin with the development of an evaluation system to be used by LEAs. Following the development of the system, 40 programs throughout the State will be evaluated. The local data will be aggregated to gain insight into the impact and effectiveness of transition programs in Maine.

Formation of a stakeholder group will be the first systematic activity. The beginning of such a group exists now in the "Secondary Transition Committee." Representatives from additional, diverse constituency groups will be assembled. This body will serve as a steering committee for the duration of the project. The committee will work to establish goals and objectives for transition programs throughout the State of Maine. Following the clear articulation and sequencing of program goals, project staff will develop evaluation questions to address these goals and objectives. With the assistance of the stakeholder committee, project staff will determine which sources can best provide information regarding the attainment of these goals. Appropriate instrumentation will then be developed. Such instrumentation will include surveys, structured interviews, record reviews, and standard review of relevant documentation. Following construction of appropriate evaluation instruments, a manual will be developed that will provide comprehensive instructions for the conduct of the evaluation. Issues such as sampling, data collection strategies, and data analysis procedures will be detailed.

Three representative LEAs will be selected as field test sites. In these sites the complete evaluation process will be followed in order to determine the effectiveness of the assessment, design, methodology, sampling techniques, data collection, analysis, and interpretation strategies. The evaluation manual and instruments will be revised with feedback from the field tests.

At this point, a sample of 40 LEAs will be asked to participate in the Statewide assessment of impact and effectiveness. A project staff member will be selected to assist with the evaluation in each LEA. Following the collection and analysis of data, the stakeholder committee will be reconvened to assist in the interpretation of results.

A final summary report will be developed that will provide results and recommendations on the impact and effectiveness of transition programs throughout the State of Maine.

Major components of the transition process to be evaluated are (1) the high school foundation; (2) transition without special services; (3) transition with time-limited services; (4) transition with ongoing services; and (5) the employment foundation.

Both process and product goals for transition programs will be identified, and evaluation questions will be derived from the goals.

Delaware Department of Public Instruction

"A Study of the Relationship of Education and Transition Factors to the Job Status of Mildly and Moderately Handicapped Students."

Project Director: Wilmer Wise

Cost: Federal Share:	$ 89,035
SEA Share:	$ 59,542
Total:	$148,577

Project Period: October 1, 1985 to March 31, 1987

Abstract:

The student sample will be composed of all mildly and moderately handicapped students (selected from Levels II-V of the Delaware Continuum of Services Model) who left the preparing schools in June 1985 under any one of three exit conditions: with diploma, with certificate of completion, or having reached maximum age allowed by law. The estimated number of students to be included in the study is 400. These students will have exited from all school types in operation in the State of Delaware: special schools, intensive learning centers, part-time vocational, full-time vocational, and comprehensive high schools.

Information will be obtained from a post-high school interview, and from student records and transcripts from three periods of time during high school, at exit from high school, and at six months after exit from high school. The project intends to describe the program choices and course-taking patterns for the class of 1985 students included in the study, and to establish the level of concentration of high school vocational preparation. Study variables relating to employment include (1) the intensity of the Special Education program to which the student was exposed; (2) the intensity (concentration) of the vocational education program to which the student was exposed; (3) successful completion of a high school driver's education course; (4) programs and course-taking patterns; and (5) method of exit.

The study will adequately describe major variables relating to job status, and will examine relationships between variables. Inclusion of data for three periods of time will support analysis of relationships between (1) personal and program variables and method of exit, (2) method of exit and work status variables, and (3) personal and program variables and work status variables.

Information to be obtained on students will be comprehensive, in order to enhance interpretability of findings in light of rivaling hypotheses. Analyses designed to describe the status of these students and determine relationships will be designed to permit initial molar analyses for entering the data base dividing the sample consistent with definitions of mild and moderate. Second level analyses will utilize Federal definitions of categories. Finally, analyses will be designed which consider the heterogeneity within and between these categories. This latter analysis of students will facilitate the interpretation of data which will be confounded by student cognitive, behavioral, and emotional characteristics and intensity of service, program placement, courses taken, and job status.

Vermont State Department of Education

"SEA Evaluation Studies."

Project Director: Theodore Riggen

Cost: Federal Share:	$106,844
SEA Share:	$136,098
Total:	$242,942

Project Period: October 1, 1985 to March 31, 1987

Abstract:

The proposed evaluation will develop and implement on a Statewide basis a system through which the impact and effectiveness of special education programs and service can be annually evaluated at local, regional, and State levels.

Vermont will develop and implement a special education cost accounting system that will give an accurate and full account of all local, State, Federal, and other expenditures for the education of handicapped children and youth. Measurement systems will be developed and implemented at the local educational level (superintendency) which will provide data allowing normative comparisons among superintendencies. The project will develop and implement an external evaluation procedure that will validate cost data and normative indicator measures and provide quality evaluation of special education. The result will affect local educational agency and State educational agency decision makers, insure reliability of cost data and normative indicator measures, and will promote special education programs of high quality. The project will develop a data management system that collects, stores, reduces, transmits, and reports evaluation data to decision-making groups and the public.

In order to achieve the development of a cost accounting system, project staff in consultation with local educators of special education will construct a list of special education expenditures that ought to be accounted for on an annual basis. Pencil and computer cost accounting systems will be developed with the goal of moving everyone toward computerized systems.

The data collection instruments and procedures will be studied by one or more CPA firms which have extensive experience in conducting school district audits. The CPAs will be asked to analyze the data gathering materials from a technical as well as a practical perspective.

All materials and procedures will then be field tested. An analysis will be made at this point of the amount of time involved in collecting and reporting the desired fiscal data.

The project will identify and field test many measurable indicators to evaluate special education, thereby determining the impact and effectiveness of special education. For the purposes of this project, these measurable variables are called "normative indicators." The normative indicators will address inputs, processes, and outputs of Vermont's special education programs. Prioritized normative indicators will be generated by Vermont's Special Education Evaluation Committee. Five local educational agencies, one from each of the five regions in Vermont, will be selected to implement measurement operations for each of the selected normative indicators. Project staff will then develop a manual that contains measurement operations and responsibilities, reliability procedures, timelines for data gathering, and formats and time lines for reporting data summaries. Local educational agencies will use the manual to collect and report data to local and State decision makers. The data will be compiled in normative form, reporting these to each local educational agency, as well as each local educational agency's reference point on each normative indicator relative to the overall State norms for that school year.

The project will use the Johnson-Godberry Special Education Program Definition Model as one of the key foundation blocks upon which to build this evaluation study. Quality indicators will be developed for the 18 Johnson-Godberry program elements and measurements systems for each set of quality indicators. A model will then be developed for external site visits to local educational agency special education programs to include procedures and instruments for the reliable assessment of each quality indicator. The external site visit model will be pilot tested in one local educational agency. Based on the results of the pilot test, a manual for external quality evaluation and validation of cost and normative indicator data will be created. About 12 local educational agencies per year will receive an external quality evaluation of cost and normative indicator data. This would insure that each Vermont local educational agency would undergo such evaluation and validation once every five years.

Given the evaluation and cost data generated by these activities, Vermont will develop and field test a data management system that collects, stores, reduces, transmits, and reports evaluation data to decision-making groups and the public. The framework for tracking the outcomes of external site visits using the quality indicators, the initial normative indicators, and the cost indicators provides the framework for a Management Information System which the project will develop.

Abstracts of State Educational Agency/Federal Evaluation Studies Program Cooperative Agreements for FY 84

State/Title	Project Director/Address	Grant Period/Amount
California State Department of Education "Alternatives to Special Education for Students with Learning Problems"	Dr. Margaret Scheffelein California State Department of Education Special Needs Division Room 610 721 Capitol Mall Sacramento, CA 95814 (916) 323-4768	10/01/84 - 03/31/86 Federal - $122,340 SEA - $ 81,560 Total - $203,900

Abstract: The California State Department of Education's evaluation study will (1) investigate the effect and effectiveness of alternative functioning student study team models and (2) provide implications for potentially refining current identification procedures and eligibility criteria related to learning disabilities and students requiring special education and related services.

A statistical profile of the referrals made to the student study team will be documented. The study will yield information on the types of interventions that the teams are recommending and the frequency of utilization of each option, including recommended placement in special education services. Students will be tracked according to the IEP Team's recommendations, which may include special classes, resource specialists' programs, designated instruction and services (speech and language therapy, adaptive physical education, or other resources), other program services, or no special education services because the pupil is ineligible for services.

After the students receive the designated assistance for a 4-6 month period, they are re-evaluated to determine if they have progressed in their areas of need. The evaluation will study successful vs. unsuccessful interventions and identify critical aspects predictive of intervention outcomes.

State/Title	Project Director/Address	Grant Period/Amount
Connecticut State Department of Education "Assessing the Impact and and Effectiveness of Critical Variables that Affect the Placement of Emotionally Maladjusted Students"	Dr. Thomas Gillung Bureau of Student Services Connecticut State Department of Education P.O. Box 2219 Hartford, CT 06145 (203) 566-3561	11/01/84 - 08/31/86 Federal - $159,399 SEA - $120,480 Total - $279,879

Abstract: The Connecticut State Department of Education proposes to examine the critical variables related to placement of emotionally maladjusted children in out-of-district private facilities and their return to local school districts. The following critical variables will be examined: the characteristics of students placed in out-of-district private facilities; the relationship between the characteristics of public and private school programs and the emotionally maladjusted students placed in these programs; the characteristics of public and private school programs that facilitate the return of emotionally maladjusted students to local school districts; funding characteristics of out-of-district private facility placements; and the cost-effectiveness of placement in out-of-district private facilities vs. local school districts.

There are five phases to the evaluation. In Phase I, the study will identify a list of independent variables through a review of the literature, SEA data, and interviews with an External Advisory Committee. The master list of variables will form the basis for a field survey that will be conducted by a Likert-type instrument to determine if the master list (independent) variables are related to the dependent variables. The dependent variables are the (1) proportion placed out-of-district, (2) proportion placed out-of-district and returned to the LEA each year, and (3) proportion placed out-of-district in excess of three years. The product of Phase I is a final definition and measurement techniques for assessing dependent variables. In Phase II, three sets of instruments will be developed: (1) an instrument to collect SEA data, (2) a program survey on LEA district-level independent variables, and (3) a case study instrument package. In Phase III, data will be collected using the three data collection instruments developed in Phase II. Data analysis will occur in Phase IV, and reporting in Phase V.

State/Title	Project Director/Address	Grant Period/Amount
District of Columbia Public Schools "Project REMODEL: Research/ Evaluation Model for Secondary Learning Disabled"	Maureen Thomas D.C. Public Schools Division of Special Education Department of Education Webster Administration Building 10th & H Streets, N.W. Washington, D.C. 20001 (202) 724-4018	01/01/85 - 09/30/86 Federal - $165,833 SEA - $112,548 Total - $278,381

Abstract: The District of Columbia Public Schools will examine existing options for serving learning disabled youth in regular education settings and the effectiveness of these options. The instructional options include: (1) regular class placement with itinerant services, (2) resource room help, (3) learning center placement, and (4) career/vocational training program with special education support.

The focus of the study will be on presently operating programs that serve secondary level learning disabled students at least part-time in the mainstream of the school system. At each site, information will be gathered on: (1) the system of delivery of services to students, (2) progress on students, and (3) a follow-up of program graduates at the senior high school level to ascertain the degree to which the program models prepared students for postsecondary experiences. Areas for examination in the system of delivery of services include the keeping of student records, the function of the multidisciplinary team at the school, transportation, health services, and the availability of opportunities for mainstream experiences. Observation, questionnaires, interviews, checklists, parents, review of student progress data, student surveys, and direct measurement of student achievement will serve as the data gathering methods.

Data from each program site evaluated will be obtained. The final report will present the findings from each program.

State/Title	Project Director/Address	Grant Period/Amount
Hawaii State Department of Education "Assessment and Improvement of Related Services for All Special Education Students"	Special Needs Branch State Department of Education 3430 Leahi Avenue Honolulu, HI 96815 (808) 737-3720	10/01/84 - 03/31/86 Federal - $131,706 SEA - $ 89,180 Total - $220,886

Abstract: The Hawaii State Department of Education's evaluation study will use the context-input-process-product (CIPP) model to evaluate several areas. Context evaluation will address the need for information about the environment in which related services must function. Through context evaluation, the social, political, and economic forces that impact on the related services systems as a whole will be identified and described.

Input evaluation will assess the present use of system resources. A descriptive study of the present system will analyze available data on each related service in terms of students served by handicapping condition (frequency and percentage), location (Hawaii's seven educational districts), nature of service (direct or indirect), frequency of service (average per month, and cost of service per unit). This information will serve as a base to plan structural changes (e.g., redistribution of resources).

Process/product evaluation will focus on the identification and solution of service implementation problems. A descriptive study of the process of providing related services will focus on a small group of students from three schools or classrooms who are representative of the system as a whole. The students will be described in terms of product measures and indicators of objective accomplishment. Each student will receive the planned related service as indicated in the students' IEP. Product measures will then be taken at the end of the predetermined time interval to assess the effectiveness and impact of related services.

State/Title	Project Director/Address	Grant Period/Amount
Illinois State Board Department of Education "The Effectiveness of Options for Educating Learning Disabled Students in Illinois"	Specialized Educational Services Illinois State Board of Education 100 North First Street Springfield, IL 62777 (217) 782-6601	11/06/84 - 04/30/86 Federal - $ 60,000 SEA - $ 44,030 Total - $104,030

Abstract: The Illinois State Board of Education's evaluation study will examine options that currently exist for serving learning disabled students in Illinois within the regular educational program, and the effectiveness of these options. Alternative delivery systems will be identified on a continuum, and data on the number of students served by each will be collected. The study will investigate the methods used to determine the type of delivery for various types of students.

A comprehensive profile of the Statewide learning disabilities delivery system, based upon the incidence of various types of students in each type of alternative program, will be developed. The evaluation will assess the effects of participation in the various types of major remedial delivery systems.

State/Title	Project Director/Address	Grant Period/Amount
Louisiana Department of Education "Proposal for a Statewide Evaluation of Early Education Programs for Handicapped Children in Louisiana"	Dr. Betty Anderson Louisiana Department of Education P.O. Box 44064 Baton Rouge, LA 70804 (504) 342-3633	01/01/85 - 06/30/86 Federal - $113,781 SEA - $ 89,108 Total - $202,889

Abstract: The Louisiana Department of Education proposes a Statewide evaluation of the early education program for handicapped children in Louisiana. The primary focus of data collection will be at the program level, and on program variations. Data will be collected on all 68 local programs. Areas of concern include referral, identification, assessment, placement, treatment, duration of treatment, related and support services, and placement after exit. Participants in the study include teachers, aides, children, parents, assessment personnel, and central office administrators.

Child data will be tied to program data for analyses so that comparisons can be made among the programs. When data is needed in addition to that available through the Louisiana Network of Special Education Records (LANSER), classroom observations, time-on-task, and placement after exit data will be collected.

State/Title	Project Director/Address	Grant Period/Amount
Massachusetts Department of Education "An Assessment of the Impact and Effectiveness of Special Education: Summary of Comprehensive Local Evaluation Findings"	Judith Riegelhaupt Special Education Division State Department of Education Quincy Center Plaza 1385 Hancock Street Quincy, MA 02169 (617) 770-7468	10/01/84 - 03/30/86 Federal - $ 99,853 SEA - $ 71,857 Total - $171,710

Abstract: The Massachusetts Department of Education's evaluation study will examine and aggregate the results of special education program evaluations independently conducted by local educational agencies in the State of Massachusetts to identify program impact and effectiveness. A comprehensive analysis of information collected at the local level will be conducted to provide a Statewide perspective.

In Phase I of the study, all LEAs in the State of Massachusetts will be surveyed to identify evaluation methods being employed, the reasons for their selection, suggestions for modification. The project will report on these evaluation procedures. Those LEAs that use the Management Tool Model will submit copies of their evaluation report's raw data. A sample of LEAs will be interviewed, and through the interviews and site observations the project will determine if results correspond with evaluation findings, and if evaluation validity is differentially affected by the type of LEA in which the evaluation was conducted.

In Phase II, an evaluation of a representative sample of evaluations conducted in Massachusetts LEAs in 1981-1982 using a modified Management Tool Model will be analyzed. This process will provide information on the impact of special education programming upon handicapped students throughout the State. Student objectives will be rank-ordered by level of achievement and intra-district comparisons will be made. An evaluation data base will be established that will continue to be used and expanded by the Massachusetts State Department of Education for the purpose of longitudinal study.

In Phase III, a panel-reaction format conference will be held to review the findings, to provide critical insight and assist in contextual interpretation.

State/Title	Project Director/Address	Grant Period/Amount
Minnesota Department of Education "The Impact and Effectiveness of Educational Services to Learning Disabled Students Served Within Regular Education"	Thomas Lombard Minnesota Department of Education Capitol Square Building Room 813 550 Cedar Street St. Paul, MN 55101 (612) 296-4163	01/01/85 - 06/30/86 Federal - $131,938 SEA - $ 88,011 Total - $219,949

Abstract: The Minnesota Department of Education's evaluation study will determine the impact and effectiveness of local programs serving learning disabled students within regular education.

A descriptive phase of the evaluation will describe trends in placement of Minnesota students in LD programs. Data from 434 school districts on rate of identification and growth rate of LD programs over the past 5 years will be described, along with data from Iowa and Colorado, and National incidence data from SEP. In the comparative phase, two groups of 10 school districts will be compared between and within groups, on nonspecial education alternative services, school effectiveness characteristics, regular education curriculum expectations, and referral outcomes for full caseload programs. Surveys or rating scales will be used to collect the data. Participating school districts will be those that were identified as ranking highest and lowest on combined service and growth rates in the descriptive phase of the evaluation. A 10 percent random sample of K-6, LD students will be compared on validity rates for placement, period of time and age range, special areas of need, and extent of related services. The data will be collected from student records. An experimental phase will examine changes over time in a school district that uses a decisionmaking model intended to reduce overdependence on special education resources and increase the involvement of regular education. The subjects of the experimental phase of the evaluation will be all K-6 students referred for low achievement in a large district or group of districts using a decision-making model, and a sample of K-6 students previously placed in a district LD program. All K-6 sites will be assessed for school effectiveness characteristics and compared with high/low service districts from the comparative phase of the evaluation.

State/Title	Project Director/Address	Grant Period/Amount
New York State Education Department "Evaluation of the Impact and Effectiveness of New York State's Effort Toward the Provision of a Free Appropriate Public Education - Evaluation of Secondary Programming for Mildly Handicapped Students"	Lawrence Gloeckler Office for Education of Children with Handicapping Conditions N.Y. State Department of Education Education Building Annex Room 1073 Albany, NY 12234 (518) 474-5548	10/01/84 - 03/31/86 Federal - $ 60,000 SEA - $ 40,000 Total - $100,000

Abstract: The New York State Education Department will assess the impact and effectiveness of the curriculum and special education services provided to secondary level mildly handicapped students in order to evaluate the State's effort toward provision of a free appropriate public education. The study will evaluate the impact and effectiveness of these programs and services in assisting handicapped students to achieve credits and pass required State examinations that lead to receipt of a diploma or to achieve post-school success, i.e., employment through alternative programs provided by local educational agencies.

The evaluation will use a sample of 75 local school districts in upstate New York and New York City to answer each of the four objectives. Data will be collected on mildly handicapped students who entered secondary programs in 1980 and 1981 and completed their programs in 1984 and 1985, respectively, in order to develop 2 years of baseline data. Procedures will include review of mildly handicapped students' cumulative record cards and academic folders.

State/Title	Project Director/Address	Grant Period/Amount
Oregon Department of Education "State Evaluation Consortium to Evaluate Special Education Services"	Robert J. Siewert Special Education and Student Services State Department of Education 700 Pringle Parkway S.E. Salem, OR 97310 (503) 378-2265	01/01/85 - 06/30/86 Federal - $121,938 SEA - $ 81,605 Total - $203,543

Abstract: The Oregon Department of Education and the Alaska Department of Education are conducting a joint evaluation study, with the assistance of the Northwest Regional Educational Laboratory. The study will assess the effects of projects in small rural and medium sized school districts, and describe service delivery costs.

The project will collect and review existing documents from a sample of districts, conduct a literature review, and conduct a survey of districts in Alaska and Oregon to be used in the development of prototype impact evaluation designs, program description protocols, and descriptions of standards. The materials will be field tested, and based on the field test, materials will be revised for use in the larger scale data collection effort. Data will then by collected to answer specific questions related to the project objectives: How are funding models being used by districts? Which small, rural schools are providing the most effective services, how much do these services cost, and which components can be used elsewhere? How do actual program outcomes relate to current standards--how do actual outcomes relate to desired outcomes?

The data will be analyzed to determine:

- How the costing of projects in Oregon matches up to costing models used to fund programs.
- Criteria by which students are assigned to services by districts.
- Stated goals to actual performance.
- Which small, rural districts have a good balance of cost with impact.
- Which districts are differentially most and least effective.

State/Title	Project Director/Address	Grant Period/Amount
Washington Superintendent of Public Instruction "Evaluation of Learning Disabled Identification Procedures in the State of Washington: Effectiveness, Impact and Bias"	Dr. Greg Kirsch Office of Superintendent of Public Instruction Old Capital Building FG-11 Olympia, WA 98504 (206) 753-6733	01/01/85 - 06/30/86 Federal - $ 94,950 SEA - $ 77,822 Total - $172,772

Abstract: The Washington Superintendent of Public Instruction will evaluate the potential impact of alternative learning disabilities discrepancy formulas in relation to the alternative educational options available in LEAs in the State of Washington to meet the needs of children referred for special education and related services.

The evaluation consists of several phases. Phase I will focus on computer simulation of outcomes and expected impacts resulting from applying alternative LD identification discrepancy formulas. Phase II will determine the pattern of discrepancy, scores across achievement areas and their corresponding level of severity for children referred as potentially eligible for special education and related services. Phase III will determine the effectiveness of available education program options (i.e., regular, compensatory, and special education) for educating the children referred in Phase II. Phase IV will synthesize the reports prepared in Phases I, II, and III into a final report and disseminate project findings.

APPENDIX B. SUMMARY AND ANALYSIS OF INITIAL DATA ON DEAF-BLIND CHILDREN

SUMMARY AND ANALYSIS OF INITIAL DATA ON DEAF-BLIND CHILDREN

Background Information

The Education of the Handicapped Act (EHA) Amendments of 1983 require the Secretary of Education to annually collect and analyze data from grantees receiving funds under Section 622, the "Services for Deaf-Blind Children and Youth." Section 622 (c)(1) reads as follows:

> "Programs supported under this section shall report annually to the Secretary on (A) the numbers of deaf-blind children and youth served by age, severity, and nature of deaf-blindness; (B) the number of paraprofessionals, professionals, and family members directly served by each activity; and (C) the types of services provided." (P.L. 98-199, Part C, Section 622; 20 U.S.C. 1422)

To facilitate the transmission of this data, all grantees (public or nonprofit private agencies, institutions, or organizations) providing services to deaf-blind children and youth under Section 622 are requested to annually submit this information to SEP on OMB Form 1820-0532. The regulations pertaining to this program (34 CFR 307.11 and 307.12) require each grantee to report data on all deaf-blind children and youth within the State in which the grantee is providing either direct service or technical assistance.

The count of deaf-blind children and youth generated by the report of February 1986 is a more accurate count of the total number of deaf-blind children and youth directly served by the grantees than previously available to SEP. Information from the data forms has been compared with the number of deaf-blind children and youth reported by the States under Part B of the Education for All Handicapped Children Act (EHA-B) and Subpart 2 of Part B, Title I of the Elementary and Secondary Education Act of 1965 (as modified by Chapter 1 of the Education Consolidation and Improvement Act of 1981, referred to hereafter as ECIA (SOP). This comparison is also required by the EHA Amendments of 1983:

> "The Secretary shall examine the number of deaf-blind children and youth (A) reported under subparagraph (c)(1)(A) and by the States; (B) served by the programs under Part B of this Act and Subpart 2 of Part B, Title I, of the Elementary and Secondary Act of 1965 (as modified by Chapter 1 of the Education Consolidation and Improvement Act of 1981); and (C) the Deaf-Blind Registry of each State. The Secretary shall revise the count of deaf-blind children and youth to reflect the most accurate count." (P.L. 98-199, Part C, Section 622; 20 U.S.C. 1422)

An analysis of the data forms for the FY 1986 reporting period indicates that the State coordinators continue to experience difficulty in obtaining all of the requested information. The data submitted in 1986 were much more complete, however, than the data submitted for 1985, the initial reporting period. This is exhibited by the reduced number of children in the "unknown" categories and the increased number of data points which the States were able to address. One reason for the more complete information is the extensive technical assistance provided by an SEP project conducted by the Association for Persons with Severe Handicaps (TASH) to assist State coordinators in improving their ability to collect more accurate and complete data.

Analysis of the Survey

Table B1 is a summary of the counts of deaf-blind children and youth by age group. Two figures are particularly important. The count of 485 in the "Unknown" category is approximately 10.44 percent of the total population as compared with a 16.61 percent unknown rate for 1985. This decrease supports the fact that the States are reporting more accurate and complete data.

The second important figure is the count of 947 in the 18 to 21 age group, which represents 20.39 percent of the children whose ages are known as compared with 29.85 percent reported in 1985. If the population were equally distributed across all ages, approximately 18.2 percent would be expected to fall within any 4-year category. Since the percentage of deaf-blind youth in the 18 to 21 age group is significantly less than in 1985, it suggests that the children born deaf-blind during the rubella epidemic of 1963-65 are now "aging out" of the birth to 21 age range of mandated education and services.

Table B2 reports the number of deaf-blind children and youth counted under the child counts for EHA-B and Chapter 1 of ECIA (SOP). Those reported under the column "Other/Unknown" are either (1) children and youth outside the State's mandated age range and therefore receiving services supported by Section 622 funds only, or (2) children for whom it is not known whether they are being supported under EHA-B or Chapter 1 of ECIA (SOP). Most State coordinators report more deaf-blind children and youth than are reported in the "Deaf-Blind" category for both EHA-B and Chapter 1 of ECIA (SOP).

Tables B3 and B4 indicate the handicapping condition categories under which these children are reported.

The Eighth Annual Report to Congress did not include information on the number of children and youth in relation to the nature and severity of deaf-blindness because States were not able to provide enough data to enable SEP to project national totals with any degree of accuracy. Data submitted for 1986 are presented in Tables B5 and B6.

States were requested to indicate the etiology of the deaf-blindness of all children and youth served (see Table B5) in response to the statutory requirement to report the number of children and youth according to the nature of deaf-blindness. Although the percentage of children and youth whose etiology is not known is 44.16 percent,[1] the highest single cause of deaf-blindness is still maternal rubella, which accounts for 33.54 percent of the known cases.

In terms of severity of deaf-blindness, States indicated the degree of vision and hearing loss as reported in Table B6. The number of children for whom this information was not reported accounts for 32.36 percent under the degree of vision loss and 38.86 percent under the degree of hearing loss. One reason for this lack of information is that it is extremely difficult to accurately determine the degree of vision and hearing loss in those deaf-blind children and youth who are also severely mentally handicapped.

Table B7 shows the types of services provided by each project to professionals, paraprofessionals, and family members. The types of services include consultation, training, information and referral, respite care, and other services that may be unique to the project. The totals are a duplicative count since one person may receive more than one type of service.

The information related to the types of services provided under this authority to deaf-blind children and youth cannot be reported at this time. OSEP continues to provide technical assistance to grantee States to obtain and clarify this data.

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[1] Since the totals for many of the tables are less than the 4,645 deaf-blind children and youth reported in the entire survey, the difference between the total for each table and the 4,645 figure has been added to the total in the "Unknown" column in determining the percentage of "Unknowns" for that table.

SUMMARY OF DEAF-BLIND STUDENTS BY AGES
Data for Year: 1986

Table B1

State/Territory	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	UNK	TOTAL
	STUDENT AGES																							
ALABAMA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	90	90
ALASKA	0	1	0	1	0	2	2	2	0	2	0	0	1	1	0	2	0	0	1	0	0	1	0	16
AMERICAN SAMOA	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	3
ARIZONA	0	0	5	3	4	5	0	3	1	2	7	3	3	6	2	3	2	7	3	3	4	1	0	67
ARKANSAS	2	2	3	3	9	6	4	3	2	2	2	4	5	5	4	2	2	1	3	4	2	4	0	74
CALIFORNIA	0	2	7	11	11	15	14	9	25	10	23	15	18	12	19	18	19	21	18	34	42	0	6	349
COLORADO	1	2	1	3	7	5	0	10	2	3	5	6	3	3	10	6	3	7	4	2	8	4	0	95
CONNECTICUT	0	0	1	0	2	0	1	3	1	2	5	1	0	2	3	1	5	6	4	2	8	0	0	47
DELAWARE	0	3	0	3	1	2	7	2	2	1	1	2	1	1	0	2	2	0	3	1	0	0	0	34
DIST OF COLUMBIA	0	0	0	1	0	1	0	2	0	2	0	0	0	0	1	1	4	3	3	3	2	0	0	23
FLORIDA	0	1	1	1	1	6	4	1	4	2	2	2	8	6	9	11	7	14	7	6	14	1	1	109
GEORGIA	0	0	0	2	0	0	0	6	9	1	5	2	4	3	4	4	4	5	4	3	8	8	63	135
GUAM	0	0	1	1	0	1	1	1	0	0	0	0	1	1	0	1	0	0	0	0	2	0	0	10
HAWAII	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	26	26
IDAHO	0	0	0	0	0	1	2	2	4	1	0	0	1	1	0	1	0	0	2	0	1	0	0	16
ILLINOIS	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	179	181
INDIANA	0	0	0	1	0	3	3	1	0	0	3	1	1	0	0	1	0	1	0	1	3	0	1	20
IOWA	0	1	1	0	1	0	2	1	3	2	2	1	2	2	5	1	5	5	4	5	1	3	0	47
KANSAS	0	2	5	5	8	3	3	3	4	2	3	5	5	2	1	4	2	4	1	3	2	4	0	71
KENTUCKY	1	1	2	9	9	6	4	4	4	7	7	5	7	4	4	5	5	3	4	2	1	0	0	94
LOUISIANA	1	5	5	4	6	6	6	6	9	3	5	6	9	17	13	9	4	13	18	15	6	0	1	167
MAINE	0	0	1	1	1	1	0	1	0	0	0	0	1	0	0	0	2	1	0	2	1	0	0	12
MARYLAND	0	0	0	1	3	2	1	1	1	0	1	3	1	3	3	6	4	3	1	6	13	0	0	53
MASSACHUSETTS	3	5	5	2	3	1	4	6	1	3	2	4	2	2	8	4	3	9	7	7	7	31	0	119
MICHIGAN	0	3	7	8	4	8	11	9	2	8	6	7	6	5	3	4	6	8	5	6	15	0	12	143
MINNESOTA	0	0	3	3	2	9	1	6	6	5	2	3	2	3	4	5	1	1	6	1	10	7	1	81
MISSISSIPPI	0	0	0	0	0	0	1	1	1	2	2	5	4	2	2	4	2	1	4	3	7	9	0	50
MISSOURI	0	3	9	6	11	20	10	17	8	8	8	8	5	7	7	9	5	5	5	2	4	0	0	157
MONTANA	3	3	2	1	0	3	0	2	2	5	0	3	3	4	4	2	0	4	2	12	6	3	0	64
N MARIANNES ISLES	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3
NEBRASKA	0	0	0	1	1	1	4	9	5	2	7	9	5	2	4	11	2	1	3	3	0	0	0	70
NEVADA	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	3
NEW HAMPSHIRE	8	8	9	3	7	5	0	1	0	2	1	1	0	0	1	0	0	1	3	1	0	0	0	51
NEW JERSEY	0	3	9	4	10	6	10	6	4	9	8	9	5	6	11	13	8	10	7	5	18	0	1	162
NEW MEXICO	0	1	1	4	3	1	1	2	5	3	5	7	3	3	4	2	1	5	2	4	4	4	0	65
NEW YORK	1	7	3	15	10	17	23	12	14	7	10	21	13	10	26	20	27	37	20	16	46	0	18	373
NORTH CAROLINA	3	4	2	8	3	4	7	6	4	4	3	11	9	17	9	10	8	9	12	4	14	18	0	169
NORTH DAKOTA	0	0	0	0	1	0	1	2	2	0	1	2	4	0	0	0	0	0	1	2	4	2	0	22
OHIO	0	0	1	0	0	0	0	2	1	1	1	0	2	1	1	1	2	3	3	1	2	14	0	36
OKLAHOMA	0	14	21	27	31	33	29	25	27	23	22	8	9	9	9	9	5	7	9	5	4	0	0	326
OREGON	0	0	2	3	3	8	7	2	5	1	9	1	3	4	4	7	6	9	6	7	12	0	2	101
PENNSYLVANIA	0	0	0	2	1	2	1	2	4	3	2	2	4	3	5	8	4	2	6	2	1	28	15	97
PUERTO RICO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	39	39
RHODE ISLAND	1	2	3	1	0	2	2	3	4	0	1	1	1	3	0	2	1	1	3	3	0	1	0	35
SOUTH CAROLINA	0	1	0	3	3	4	1	1	7	3	4	8	3	5	5	3	8	4	9	6	7	1	0	86
SOUTH DAKOTA	0	0	0	6	1	4	6	5	5	1	6	4	1	0	3	0	2	2	5	0	5	4	0	60
TENNESSEE	0	0	0	4	1	0	1	2	0	1	2	0	0	1	0	0	0	2	1	0	1	0	26	42
TEXAS	1	7	5	12	14	11	13	10	16	10	12	12	7	10	13	18	20	12	14	15	17	0	1	250
UTAH	0	1	3	5	8	9	10	4	4	4	3	6	6	1	4	2	4	4	3	5	5	0	0	91
VERMONT	0	0	1	1	0	1	1	0	0	0	0	0	0	0	1	0	0	0	0	2	0	4	0	11
VIRGIN ISLANDS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
VIRGINIA	0	0	0	1	1	3	1	1	1	1	1	1	0	2	4	0	6	7	6	0	5	0	0	41
WASHINGTON	2	2	2	5	7	5	4	0	6	6	1	1	1	2	6	10	4	7	10	12	11	2	0	106
WEST VIRGINIA	0	1	1	0	0	1	1	1	1	1	1	3	1	3	0	0	2	0	2	1	5	0	0	25
WISCONSIN	0	0	0	0	0	0	1	1	2	2	3	0	0	1	0	0	2	4	3	3	6	0	0	28
WYOMING	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTALS	27	85	122	175	188	224	205	200	208	157	194	194	171	175	217	222	199	250	237	221	335	154	485	4645

Table B2

REPORT OF Part B (94-142) and P.L. 89-313 STUDENTS
Data for Year: 1986

State/Territory	PART B SEA-142	P.L. 89-313	Other & Unknown	TOTAL DEAF-BLIND
ALABAMA	10	24	56	90
ALASKA	13	1	2	16
AMERICAN SAMOA	0	3	0	3
ARIZONA	34	14	19	67
ARKANSAS	18	55	1	74
CALIFORNIA	221	34	94	349
COLORADO	1	89	5	95
CONNECTICUT	0	47	0	47
DELAWARE	0	33	1	34
DIST OF COLUMBIA	0	21	2	23
FLORIDA	68	33	8	109
GEORGIA	44	28	63	135
GUAM	0	10	0	10
HAWAII	8	18	0	26
IDAHO	4	12	0	16
ILLINOIS	0	181	0	181
INDIANA	9	10	1	20
IOWA	15	32	0	47
KANSAS	20	40	11	71
KENTUCKY	36	42	16	94
LOUISIANA	38	109	20	167
MAINE	2	6	4	12
MARYLAND	15	37	1	53
MASSACHUSETTS	34	80	5	119
MICHIGAN	9	110	24	143
MINNESOTA	0	0	81	81
MISSISSIPPI	0	45	5	50
MISSOURI	147	8	2	157
MONTANA	30	18	16	64
N MARIANNES ISLES	0	3	0	3
NEBRASKA	68	2	0	70
NEVADA	2	0	1	3
NEW HAMPSHIRE	6	15	30	51
NEW JERSEY	26	134	2	162
NEW MEXICO	35	29	1	65
NEW YORK	114	257	2	373
NORTH CAROLINA	53	113	3	169
NORTH DAKOTA	0	22	0	22
OHIO	17	18	1	36
OKLAHOMA	272	45	9	326
OREGON	0	93	8	101
PENNSYLVANIA	11	85	1	97
PUERTO RICO	21	0	18	39
RHODE ISLAND	22	6	7	35
SOUTH CAROLINA	18	68	0	86
SOUTH DAKOTA	7	53	0	60
TENNESSEE	16	26	0	42
TEXAS	121	126	3	250
UTAH	39	36	16	91
VERMONT	0	10	1	11
VIRGIN ISLANDS	0	0	0	0
VIRGINIA	15	24	2	41
WASHINGTON	50	47	9	106
WEST VIRGINIA	0	10	15	25
WISCONSIN	7	21	0	28
WYOMING	0	0	0	0
TOTALS	1696	2383	566	4645

REPORT OF Part B (SEA 142) STUDENTS
Data for Year: 1986

Table B3

State/Territory	(1) Ment Retrd	(2) Spch Imprd	(3) Emot Dist	(4) Orthp Imprd	(5) Other Hlth	(6) Learn Disab	(7) Multi Hndcp	(8) Hard Hrng	(9) Deaf	(10) Vis Hndcp	(11) Deaf-Blind	(12) Unkn	TOTAL
	REPORTED HANDICAPPING CONDITION CATEGORY												
ALABAMA	2	0	0	0	0	0	2	0	0	0	0	6	10
ALASKA	0	0	0	0	0	0	13	0	0	0	0	0	13
AMERICAN SAMOA	0	0	0	0	0	0	0	0	0	0	0	0	0
ARIZONA	1	0	0	0	0	0	28	0	0	3	2	0	34
ARKANSAS	0	0	0	0	0	0	7	0	0	0	11	0	18
CALIFORNIA	7	0	0	0	0	1	84	0	2	2	99	26	221
COLORADO	0	0	0	0	0	0	0	0	0	0	1	0	1
CONNECTICUT	0	0	0	0	0	0	0	0	0	0	0	0	0
DELAWARE	0	0	0	0	0	0	0	0	0	0	0	0	0
DIST OF COLUMBIA	0	0	0	0	0	0	0	0	0	0	0	0	0
FLORIDA	6	32	0	0	0	0	0	0	0	0	30	0	68
GEORGIA	0	0	0	0	0	0	43	0	0	0	1	0	44
GUAM	0	0	0	0	0	0	0	0	0	0	0	0	0
HAWAII	1	0	0	0	0	0	7	0	0	0	0	0	8
IDAHO	2	0	0	0	0	0	2	0	0	0	0	0	4
ILLINOIS	0	0	0	0	0	0	0	0	0	0	0	[illegible]	0
INDIANA	0	0	0	0	0	0	0	0	0	0	0	9	9
IOWA	0	0	0	0	0	0	0	0	0	0	15	0	15
KANSAS	0	0	0	0	0	0	5	0	0	0	15	0	20
KENTUCKY	13	0	0	0	0	0	13	6	0	1	3	0	36
LOUISIANA	1	0	0	0	1	0	6	2	18	4	6	0	38
MAINE	0	0	0	0	0	0	0	0	0	0	0	2	2
MARYLAND	14	0	0	0	0	0	1	0	0	0	0	0	15
MASSACHUSETTS	0	0	0	0	0	0	0	0	0	0	0	34	34
MICHIGAN	0	0	0	0	0	0	9	0	0	0	0	0	9
MINNESOTA	0	0	0	0	0	0	0	0	0	0	0	0	0
MISSISSIPPI	0	0	0	0	0	0	0	0	0	0	0	0	0
MISSOURI	0	0	0	0	0	0	47	0	1	0	99	0	147
MONTANA	0	0	0	0	0	0	0	0	0	0	0	30	30
N MARIANNES ISLES	0	0	0	0	0	0	0	0	0	0	0	0	0
NEBRASKA	47	0	0	0	0	0	21	0	0	0	0	0	68
NEVADA	0	0	0	0	0	0	0	0	0	0	2	0	2
NEW HAMPSHIRE	0	0	0	0	0	0	3	0	0	0	3	0	6
NEW JERSEY	0	0	0	0	0	0	0	0	0	0	10	16	26
NEW MEXICO	0	0	0	0	0	0	28	0	1	0	6	0	35
NEW YORK	0	0	0	0	0	0	113	0	0	0	0	1	114
NORTH CAROLINA	0	0	0	0	0	0	0	0	0	0	53	0	53
NORTH DAKOTA	0	0	0	0	0	0	0	0	0	0	0	0	0
OHIO	0	0	0	0	0	0	7	1	5	1	3	0	17
OKLAHOMA	0	0	0	0	0	0	0	0	0	0	0	272	272
OREGON	0	0	0	0	0	0	0	0	0	0	0	0	0
PENNSYLVANIA	7	0	0	0	0	0	0	0	0	1	3	0	11
PUERTO RICO	0	0	0	0	0	0	0	0	0	0	0	21	21
RHODE ISLAND	0	0	0	0	0	0	0	0	0	0	0	22	22
SOUTH CAROLINA	0	0	0	0	0	0	0	0	0	0	0	18	18
SOUTH DAKOTA	0	0	0	0	0	0	0	0	0	0	0	7	7
TENNESSEE	14	0	0	0	0	0	0	0	0	0	0	2	16
TEXAS	0	0	0	0	0	0	0	40	0	0	81	0	121
UTAH	0	0	0	0	0	0	35	0	0	0	4	0	39
VERMONT	0	0	0	0	0	0	0	0	0	0	0	0	0
VIRGIN ISLANDS	0	0	0	0	0	0	0	0	0	0	0	0	0
VIRGINIA	0	0	0	0	0	0	10	0	0	0	5	0	15
WASHINGTON	0	0	0	0	0	0	30	0	3	0	17	0	50
WEST VIRGINIA	0	0	0	0	0	0	0	0	0	0	0	0	0
WISCONSIN	0	0	0	0	0	0	0	0	0	0	7	0	7
WYOMING	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTALS	115	32	0	0	1	1	514	49	30	12	476		1696

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REPORT OF P.L. 89-313 STUDENTS
Data for Year: 1986

Table B4

	REPORTED HANDICAPPING CONDITION CATEGORY												
State/Territory	(1) Ment Retrd	(2) Spch Imprd	(3) Emot Dist	(4) Orthp Imprd	(5) Other Hlth	(6) Learn Disab	(7) Multi Hndcp	(8) Hard Hrng	(9) Deaf	(10) Vis Hndcp	(11) Deaf-Blind	(12) Unkn	TOTAL
ALABAMA	0	0	0	0	0	0	0	0	1	0	23	0	24
ALASKA	0	0	0	0	0	0	0	0	0	0	1	0	1
AMERICAN SAMOA	0	0	0	0	0	0	1	0	0	0	2	0	3
ARIZONA	0	0	0	0	0	0	4	0	5	2	3	0	14
ARKANSAS	0	0	0	0	0	0	30	0	0	0	25	0	55
CALIFORNIA	0	0	0	0	0	0	29	0	0	0	5	0	34
COLORADO	1	0	0	0	0	0	7	0	0	0	81	0	89
CONNECTICUT	0	0	0	0	0	0	0	0	0	0	0	47	47
DELAWARE	0	0	0	0	0	0	0	0	0	1	32	0	33
DIST OF COLUMBIA	21	0	0	0	0	0	0	0	0	0	0	0	21
FLORIDA	8	19	0	0	1	0	2	0	0	0	3	0	33
GEORGIA	0	0	0	0	0	0	1	0	0	0	27	0	28
GUAM	0	0	0	0	0	0	0	0	0	0	10	0	10
HAWAII	8	0	0	0	0	0	6	0	1	0	3	0	18
IDAHO	1	0	0	0	0	0	11	0	0	0	0	0	12
ILLINOIS	0	0	0	0	0	0	0	0	0	0	0	0	181
INDIANA	0	0	0	0	0	0	0	0	0	0	0	10	10
IOWA	0	0	0	0	0	0	0	0	0	0	32	0	32
KANSAS	0	0	0	0	0	0	1	0	0	0	39	0	40
KENTUCKY	8	0	0	0	0	0	12	6	0	8	8	0	42
LOUISIANA	6	0	0	0	0	0	56	0	30	3	13	1	109
MAINE	0	0	0	0	0	0	0	0	0	0	0	6	6
MARYLAND	0	0	0	0	0	0	0	0	0	27	10	0	37
MASSACHUSETTS	0	0	0	0	0	0	0	0	0	0	0	80	80
MICHIGAN	0	0	0	0	0	0	110	0	0	0	0	0	110
MINNESOTA	0	0	0	0	0	0	0	0	0	0	0	0	0
MISSISSIPPI	0	0	0	0	0	0	0	0	0	0	0	45	45
MISSOURI	0	0	0	0	0	0	3	0	0	5	0	0	8
MONTANA	0	0	0	0	0	0	0	0	0	0	0	18	18
N MARIANNES ISLES	0	0	0	0	0	0	2	0	0	0	1	0	3
NEBRASKA	0	0	0	0	0	0	2	0	0	0	0	0	2
NEVADA	0	0	0	0	0	0	0	0	0	0	0	0	0
NEW HAMPSHIRE	1	0	0	0	1	0	5	0	0	0	8	0	15
NEW JERSEY	1	0	0	1	0	2	99	0	8	2	0	21	134
NEW MEXICO	0	0	0	0	0	0	1	0	0	0	28	0	29
NEW YORK	0	0	0	0	0	0	257	0	0	0	0	0	257
NORTH CAROLINA	0	0	0	0	0	0	0	0	0	0	113	0	113
NORTH DAKOTA	0	0	0	0	0	0	0	0	0	0	22	0	22
OHIO	0	0	0	0	0	0	17	0	1	0	0	0	18
OKLAHOMA	0	0	0	0	0	0	0	0	0	0	0	45	45
OREGON	45	1	0	1	0	0	1	0	9	3	33	0	93
PENNSYLVANIA	77	0	0	0	1	0	2	0	0	1	4	0	85
PUERTO RICO	0	0	0	0	0	0	0	0	0	0	0	0	0
RHODE ISLAND	0	0	0	0	0	0	0	0	0	0	0	6	6
SOUTH CAROLINA	0	0	0	0	0	0	0	0	0	0	0	68	68
SOUTH DAKOTA	0	0	0	0	0	0	0	0	0	0	0	53	53
TENNESSEE	0	0	0	0	0	0	0	0	0	0	0	26	26
TEXAS	0	0	0	0	0	0	0	30	0	1	95	0	126
UTAH	18	0	0	0	0	0	1	0	0	0	17	0	36
VERMONT	0	0	0	0	0	0	3	0	0	2	1	4	10
VIRGIN ISLANDS	0	0	0	0	0	0	0	0	0	0	0	0	0
VIRGINIA	0	0	0	0	0	0	9	0	1	0	14	0	24
WASHINGTON	0	0	0	0	0	0	26	0	3	0	18	0	47
WEST VIRGINIA	10	0	0	0	0	0	0	0	0	0	0	0	10
WISCONSIN	0	0	0	0	0	0	0	0	0	0	21	0	21
WYOMING	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTALS	205	20	0	2	3	2	879	36	59	55	692	430	2383

Table B5

DEAF-BLIND STUDENTS -- ETIOLOGY OF DEAF-BLIND CONDITION
Data for Year: 1986

State/Territory	DEAF-BLIND ETIOLOGY							
	Mtrnl Rubel	Mngts Encph	Ushrs Syndr	Centl Nervs	Peri Nervs	OTHER	UNKWN	TOTAL
ALABAMA	20	7	0	1	0	28	31	87
ALASKA	2	5	0	3	1	1	4	16
AMERICAN SAMOA	0	1	0	0	0	0	2	3
ARIZONA	15	0	0	0	0	12	34	61
ARKANSAS	18	4	0	4	0	27	21	74
CALIFORNIA	114	21	5	7	2	90	110	349
COLORADO	14	1	1	42	5	14	17	94
CONNECTICUT	34	0	3	1	0	4	5	47
DELAWARE	2	2	1	0	0	18	10	33
DIST OF COLUMBIA	2	1	0	0	0	9	11	23
FLORIDA	43	11	0	5	0	32	18	109
GEORGIA	0	0	0	0	0	0	74	74
GUAM	2	1	0	0	0	0	7	10
HAWAII	14	0	0	6	0	6	0	26
IDAHO	2	2	0	1	0	8	3	16
ILLINOIS	46	7	7	0	0	40	73	173
INDIANA	6	1	4	1	0	5	3	20
IOWA	7	9	4	6	3	6	12	47
KANSAS	5	6	0	14	2	19	25	71
KENTUCKY	14	12	1	14	0	25	27	93
LOUISIANA	36	2	35	9	11	49	23	165
MAINE	3	0	2	0	0	6	1	12
MARYLAND	21	1	0	0	1	14	15	52
MASSACHUSETTS	49	5	1	2	1	37	23	118
MICHIGAN	9	0	0	0	1	0	132	142
MINNESOTA	0	0	0	0	0	79	2	81
MISSISSIPPI	12	3	0	4	0	6	24	49
MISSOURI	15	12	3	50	7	26	43	156
MONTANA	0	0	0	0	0	0	0	0
N MARIANNES ISLES	3	0	0	0	0	0	0	3
NEBRASKA	1	4	0	2	0	22	41	70
NEVADA	0	0	0	0	0	0	3	3
NEW HAMPSHIRE	2	3	0	5	1	7	1	19
NEW JERSEY	37	0	5	17	0	80	23	162
NEW MEXICO	1	0	0	7	0	26	31	65
NEW YORK	85	16	7	37	13	45	167	370
NORTH CAROLINA	48	0	0	1	0	94	25	168
NORTH DAKOTA	5	0	0	1	0	9	7	22
OHIO	13	3	4	0	0	8	8	36
OKLAHOMA	0	0	0	0	0	0	0	0
OREGON	23	9	8	13	0	28	19	100
PENNSYLVANIA	44	6	0	4	0	18	23	95
PUERTO RICO	21	0	0	0	0	0	0	21
RHODE ISLAND	8	1	2	11	1	6	6	35
SOUTH CAROLINA	5	5	0	0	0	52	23	85
SOUTH DAKOTA	4	3	0	7	0	17	29	60
TENNESSEE	0	0	0	0	0	0	0	0
TEXAS	0	0	0	0	0	0	250	250
UTAH	10	5	0	21	0	31	24	91
VERMONT	4	1	1	3	1	1	0	11
VIRGIN ISLANDS	0	0	0	0	0	0	0	0
VIRGINIA	9	0	1	0	9	15	7	41
WASHINGTON	22	6	10	2	6	26	34	106
WEST VIRGINIA	6	0	0	0	0	19	0	25
WISCONSIN	14	2	1	1	0	8	2	28
WYOMING	0	0	0	0	0	0	0	0
TOTALS	870	178	106	302	65	1073	1473	4067

Table B6

DEAF-BLIND STUDENTS -- DEGREE OF VISION AND HEARING LOSS
Data for Year: 1986

DEGREE OF LOSS>>	VISION					HEARING				
State/Territory	Part Sght	Legl Blnd	Lght Prcp	Totl Blnd	UNKN	Mild	Modr	Sevr	UNKN	TOTALS
ALABAMA	1	21	7	17	44	6	9	42	33	90
ALASKA	4	4	6	1	1	5	5	4	2	16
AMERICAN SAMOA	0	0	1	2	0	0	0	0	3	3
ARIZONA	2	25	1	6	31	6	8	24	26	65
ARKANSAS	6	10	8	21	28	7	15	10	42	73
CALIFORNIA	45	82	25	50	147	25	62	108	154	349
COLORADO	10	32	9	8	31	25	13	18	36	90
CONNECTICUT	3	41	2	0	1	2	33	11	1	47
DELAWARE	5	3	0	6	20	9	9	12	4	34
DIST OF COLUMBIA	2	9	0	1	10	6	6	6	5	22
FLORIDA	9	36	15	39	10	6	14	70	19	109
GEORGIA	18	13	8	9	84	4	14	12	103	132
GUAM	1	1	2	3	3	2	2	5	1	10
HAWAII	3	9	7	7	0	0	2	22	2	26
IDAHO	5	5	3	2	1	5	2	8	1	16
ILLINOIS	32	75	26	39	8	23	54	80	24	180
INDIANA	1	10	4	4	1	3	1	13	3	20
IOWA	3	4	6	12	22	5	7	15	20	47
KANSAS	2	21	12	4	32	11	14	23	23	71
KENTUCKY	11	15	59	8	1	7	36	50	1	94
LOUISIANA	32	37	12	38	44	24	28	75	39	163
MAINE	2	7	1	2	0	2	2	8	0	12
MARYLAND	10	15	13	12	3	12	12	26	1	53
MASSACHUSETTS	13	66	24	16	0	19	37	63	0	119
MICHIGAN	0	131	0	0	12	0	131	0	12	143
MINNESOTA	0	0	0	0	81	0	0	0	81	81
MISSISSIPPI	2	10	10	27	1	8	12	21	9	50
MISSOURI	20	39	27	16	55	43	24	41	48	157
MONTANA	0	0	0	0	0	0	0	0	0	0
N MARIANNES ISLES	0	3	0	0	0	0	2	1	0	3
NEBRASKA	2	13	3	1	51	3	15	22	30	70
NEVADA	0	1	0	0	2	0	0	1	2	3
NEW HAMPSHIRE	16	9	6	2	16	11	5	16	17	49
NEW JERSEY	13	95	23	30	1	11	38	110	3	162
NEW MEXICO	12	9	9	19	16	7	11	22	25	65
NEW YORK	25	114	29	49	155	24	44	112	191	372
NORTH CAROLINA	48	84	23	14	0	32	72	65	0	169
NORTH DAKOTA	3	5	4	6	4	12	3	5	2	22
OHIO	7	9	9	7	4	6	3	25	2	36
OKLAHOMA	0	0	0	0	9	0	0	0	9	9
OREGON	24	40	12	10	9	12	25	51	9	95
PENNSYLVANIA	3	36	18	13	27	8	14	44	31	97
PUERTO RICO	24	0	0	12	0	0	14	12	0	36
RHODE ISLAND	5	15	7	7	1	11	13	10	1	35
SOUTH CAROLINA	7	53	14	12	0	23	29	32	2	86
SOUTH DAKOTA	8	8	2	15	27	22	3	14	21	60
TENNESSEE	0	0	0	0	0	0	0	0	0	0
TEXAS	27	157	28	38	0	0	0	0	250	250
UTAH	5	20	15	10	41	6	20	25	40	91
VERMONT	1	7	1	2	0	1	3	7	0	11
VIRGIN ISLANDS	0	0	0	0	0	0	0	0	0	0
VIRGINIA	3	22	4	12	0	11	10	18	2	41
WASHINGTON	27	25	13	30	11	10	27	61	8	106
WEST VIRGINIA	3	1	1	15	5	5	0	9	11	25
WISCONSIN	6	1	2	18	1	1	1	22	4	28
WYOMING	0	0	0	0	0	0	0	0	0	0
TOTALS	511	1448	511	672	1051	481	904	1451	1353	4193

Table B7

Services Provided to Professionals. Paraprofessionals and Family Members

STYR	Consult			Training			Info/Refr			Transprt			Respite			Other		
	Pro	Para	Fam	Pro	Para	Fam	Pro	Para	Fam	Pro	Para	Fam	Pro	Para	Fam	Pro	Para	Fam
AK87	13	21	10	30	31	5	16	1	10	0	0	0	0	0	0	0	0	0
AL87	16	4	172	166	64	49	55	17	115	0	0	130	0	0	0	0	0	20
AR87	0	0	0	250	60	30	80	30	80	0	0	0	0	0	0	0	0	0
AZ87	0	0	5	17	26	0	200	0	25	0	0	0	0	0	0	0	0	4
CA87	11	2	4	53	12	0	10	0	4	0	0	0	0	0	0	0	0	0
CO87	60	0	6	66	0	20	5	0	2	31	0	0	0	0	0	0	0	0
CT87	50	11	3	11	0	0	14	0	110	0	0	0	0	0	0	0	0	0
DC87	15	0	16	10	6	0	21	6	22	0	0	0	0	0	0	0	0	0
DE87	47	24	37	134	22	42	12	0	6	0	0	0	0	0	0	0	0	30
FL87	25	15	20	50	20	60	40	10	25	0	0	0	0	0	0	0	0	0
GA87	52	14	24	16	0	10	11	0	13	0	0	4	0	0	0	0	0	0
HI87	15	0	28	15	0	20	0	0	10	0	0	0	0	0	15	0	0	0
IA87	0	0	48	936	82	16	0	0	43	0	0	0	0	0	0	0	0	0
ID87	9	14	8	21	25	7	30	13	9	0	0	0	0	0	1	0	0	0
IL87	11	0	7	3	3	7	0	0	0	15	0	7	0	0	0	30	0	410
IN87	0	0	0	3	9	0	0	0	0	0	0	0	0	0	0	0	0	0
KS87	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
KY87	120	30	35	150	25	10	15	0	15	0	0	0	0	0	0	0	0	0
LA87	9	5	17	2	0	4	72	0	14	0	0	0	2	0	0	0	0	0
MA87	160	40	17	71	16	0	77	0	206	0	0	0	0	0	0	0	0	0
MD87	4	3	22	25	9	1	5	4	4	2	2	29	0	0	0	0	0	0
ME87	9	4	1	20	7	2	7	0	18	0	0	0	0	0	0	0	0	0
MI87	102	0	35	75	90	80	300	0	0	6	0	0	0	0	0	12	0	2
MO87	72	170	52	206	0	31	0	0	21	0	0	0	0	0	52	0	0	0
MS87	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
MT87	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
NC87	27	3	26	73	32	8	33	4	17	0	0	0	0	0	0	0	0	0
ND87	17	8	41	117	105	0	0	0	12	10	5	1	0	0	1	0	0	0
NE87	20	40	5	100	105	15	15	0	12	0	0	0	0	0	0	0	0	0
NH87	34	16	32	15	8	15	0	0	55	0	0	0	0	0	1	0	0	0
NJ87	50	50	250	50	50	250	50	50	250	0	0	0	0	0	0	0	0	0
NM87	14	81	0	140	100	45	9	0	15	113	0	20	0	0	0	0	0	0
NY87	50	50	150	250	0	0	200	100	0	0	0	15	0	0	0	0	0	0
OK87	0	0	0	91	220	100	120	220	140	0	0	0	0	0	0	0	0	0
OR87	70	125	10	200	125	10	70	0	50	0	0	0	0	0	0	0	19	19
RI87	22	14	35	19	23	43	78	35	43	4	0	1	0	0	3	12	0	6
SC87	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TN87	14	2	34	0	0	0	26	2	7	3	0	3	0	0	0	0	0	0
UT87	30	42	44	31	47	39	10	7	39	3	15	0	0	0	14	0	0	0
VA87	17	40	10	56	109	18	26	29	17	0	0	0	0	0	0	0	0	0
VT87	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
WA87	150	50	35	325	100	35	250	60	100	15	5	30	0	0	40	0	0	0
WI87	14	44	25	0	0	0	0	0	0	0	0	0	3	0	3	0	0	0
WV87	0	0	0	21	25	30	11	3	6	0	0	0	0	0	5	0	0	0
TTL .	1361	850	1272	3026	1572	990	1868	591	1523	210	27	248	2	0	135	54	19	499

ile 1. 12/5/86

Data provided by 44 States and DC for 1986.

APPENDIX C. MEDIA AND MATERIALS CENTERS

MEDIA AND MATERIALS CENTERS

Under the authority contained in Section 653 of the EHA, the Department of Education established two national centers on educational media and materials for the handicapped to facilitate the use of new educational technology in the education of handicapped individuals. One of these centers serves as an information exchange network on technology in special education, and the other provides information about special education software, addressing the application of technology for the special educator and administrator. A provision of Section 653 calls for annual reporting by the Secretary to Congress on activities carried out under this authority.

Center for Special Education Technology Information Exchange

This center is operated through contract with the Council for Exceptional Children, a national professional organization that further subcontracts for the development and maintenance of an information base and research, development, and marketing activities for information exchange on technology in special education.

The need for this center was established several years ago when the Secretary's Task Force on Learning and Electronic Technology advised that the potential benefits of technology in education would not be realized without active Federal leadership.

The mission of the Center for Special Education Technology is to provide a national technology information exchange to assist persons involved in the education of handicapped children and youth. By identifying and providing information on emerging trends in technology, the Center assists special educators, administrators, and parents as they adopt new technologies to improve the delivery and quality of education for handicapped students.

The Center maintains a specialized information based to provide information services to teachers, administrators, and parents interested in using technology with handicapped individuals. The information base consists of an automated file used to assist clients in locating information they need for program planning and development.

The topics maintained in the information base emphasize technological advances and applications relevant to the education of handicapped children. These general categories of technology are used:

- audio-based advances (e.g., voice response technology, audiotex, slow-scan television);

- computer-based advances (e.g., microcomputers, speech synthesis devices, robotics); and

- video-based advances (e.g., videodisc, videotape interactive cable television).

The educational applications of these technological advances include the use of technology for instruction, for management of programs and teacher training, for communication and networking, as personal aids for handicapped individuals, and for academic and social learning in the home.

Relevant information may be in the form of a published article in a professional journal, the final report of a research investigation, a description of an effective practice, or a description of a new device or product. Information or services are also provided by a variety of national and State groups such as professional organizations, computer-user groups, and product developers and vendors.

User information requirements were identified in formal discussions of the Center advisory board and through ongoing interactions with clients. A 10-member advisory board assists the staff in identifying issues that teachers, administrators, and parents face as they incorporate technology in special education. The board includes representatives of the key groups served by the Center.

Seven broad issues have been identified:

1. Selection and use of microcomputer software and hardware.

2. Selection and use of assistive and communication devices.

3. Long-range planning for the use of technology in special education.

4. Lack of information on effective special education practice.

5. Training of personnel to use technology in special education.

6. Changing views of computer literacy.

7. Computer (technology) equity for handicapped individuals.

Because information about technological advances, products, and resources is dynamic, maintaining the information base is a continuous process. Center staff estimates that eventually more than 4,000 items of information will be entered in the specialized information base.

The information exchange system provides services to four audiences--teachers, administrators, researchers, and parents--using written communication, electronic networks, and telephone-based services.

Written communication takes the form of personal correspondence, information memos and features or articles for publication. The information memo format is used to organize and synthesize information on topics identified by the advisory board or through information requests, and reflects the information in each information base file. One-hundred-ten information memos have been developed to date.

Electronic networks facilitate the exchange of information among computer users. Most wide area networks have two common features--electronic mail for person-to-person communication and bulletin boards for public exchange of information. The Center maintains two bulletin boards on SpecialNet, a nationwide network serving special education administrators and practitioners at the State and local level. The Center's closed bulletin board, TECH.LINE, provides information on technological advances and applications. The format for the TECH.LINE board parallels the Center's information files. Each month a topic is selected and relevant information on projects, publications, and readings is featured on the board. Topics addressed in FY 86 include assistive technology for the sensory impaired, technology for the learning disabled, and technology research. The format and content of the TECH.LINE has been well received by SpecialNet users.

TECH.TALK is an interactive board for the exchange of technology related information among SpecialNet users. Compared with TECH.LINE, the interactive format of the TECH.TALK board has been less successful. The increasing number of boards on SpecialNet and the demands on users to monitor boards on a regular basis were factors in limiting use. The Center has developed a plan to restructure the TECH.TALK board and encourage wider use. That plan will be reassessed at the end of year two.

Although telephone services are widely used for person-to-person communication, the use of the telephone for retrieving information is a less familiar but promising application. The Center instituted two toll-free telephone services: a hotline and a taped message service. The toll-free hotline, 1-800-345-TECH, was initiated in February of 1985. The hotline operates from 1 p.m. to 6 p.m. on weekdays. Callers can contact the Center to request information or consult with a staff member. TECH-TAPES is a telephone-based information service for educators and parents interested in using technology with handicapped children. This is the first nationwide system to feature educational information. The service was initiated in December 1985 and has a current menu of 17 topics and 106 individual messages (see Figure C1). Each message provides introductory information on the use of technology in the school and in the home. The system also introduces callers to special education and technology resources that provide services to educators and parents. Callers can request follow-up information for any message. The TECH-TAPES system is available 19 hours a day on the Center's toll-free number.

Figure C1

TECH-TAPES 1-800-345-TECH
Sponsored by The Center for Special Education Technology

TECH-TAPES is a telephone-based taped message service for educators and parents. To use the system, call toll-free 1-800-345-TECH any time except 1-6 PM. Eastern Time.

NATIONAL RESOURCES

101 Center for Special Education Technology
102 Special Education Software Center
103 National Information Center for Handicapped Children and Youth (NICHCY)
104 Higher Education and The Handicapped (HETH)
105 National Rehabilitation Information Center (NARIC)
106 Educational Resources Information Center (ERIC)
107 Special Education Programs (SEP), U.S.D.E.

SPECIAL EDUCATION ORGANIZATIONS

111 The Council for Exceptional Children (CEC)
112 Association for Children with Learning Disabilities (ACLD)
113 Association for Retarded Citizens (ARC)
114 The American Speech-Language-Hearing Association (ASHA)
115 Easter Seal Society
116 The Association for Persons with Severe Handicaps (TASH)
117 United Cerebral Palsy (UCP)

TECHNOLOGY ORGANIZATIONS

121 Technology and Media Division (TAM)
122 Association for Educational Communications and Technology (AECT)
123 Association for Educational Data Systems (AEDS)
124 International Council for Computers in Education (ICCE)
125 Association for the Development of Computer-based Instructional Systems (ADCIS)
126 Rehabilitation Engineering Society of North America(RESNA)

NETWORKS AND DATABASES

131 SpecialNet
132 CompuServe
133 TechCentral
134 Ed-Line
135 AbleData
136 Resources in Computer Education (RICE)

SPECIAL RESOURCES

141 Accent on Information
142 Center for Computer Assistance for the Disabled (C-CAD)
143 Committee on Personal Computers and the Handicapped (COPH-2)
144 Handicapped Educational Exchange (HEX)
145 Handicapped Users Database (HUD)
146 SECTOR Project

COMPUTER-ASSISTED INSTRUCTION

151 Overview of Educational Software
152 Tutorial
153 Drill and Practice
154 Simulation
155 Using Games in the Classroom
156 Learner-Centered Software
157 Small Group Computing

OTHER SOFTWARE ALTERNATIVES

161 Computer Languages
162 Authoring Languages
163 Authoring Systems
164 Word Processing
165 Electronic Spreadsheets
166 Database Management
167 Integrated Software

SOFTWARE SELECTION

301 Looking at Content
302 Looking at Format
303 Looking at Other Factors
304 Applying What You Know to Software
305 Students Evaluate Software
306 Creative Responces and Common Errors

COMPUTERS AND YOUNG HANDICAPPED CHILDREN

311 Software Selection—Setting Objectives
312 Software Selection —Setting Criteria
313 Using Computers with Preschool Children
314 Alternative Input Devices
315 Micros for Language Acquisition

COMPUTERS AND LEARNING DISABLED STUDENTS

321 Some Hints for Beginning Computer Users
322 Integrating Micros With Your Curriculum
323 Getting Ready: Preparing Teachers
324 Getting Ready: Students
325 Searching for LD Software
326 Keyboarding Skills

TECHNOLOGY AND THE ADMINISTRATOR

331 Introducing Micros to the Staff
332 The Administrative Workstation
333 Automating the School Office
334 Database Management systems (DBMS)
335 How Individualized Are Your IEPs?

ASSISTIVE DEVICES

341 Overview of Assistive Devices
342 Hearing Aids
343 Vision Aids
344 Mobility Aids
345 Communication Aids
346 Electronic Communication Devices
347 Environmental Control Units (ECUs)
348 Keyboard Alternatives
349 Speech Synthesizers

TECHNOLOGY IN THE HOME

351 Encouraging Micro Learning at Home
352 Using Micros at Home
353 Parent's Primer on Buying Software
354 Computer Art and Music
355 Computer Networks at Home
356 Off-The-Shelf Technology
357 Low Technology Switches

COMPUTER HARDWARE

361 Microcomputers
362 External Storage
363 Computer Peripherals
364 Modems
365 Lights Pens
366 Touch Pads

SHOPPING TIPS

201 Buying a Microcomputer
202 Buying a Printer
203 Buying a Monitor
204 Buying a Modem
205 Buying a VCR

TIPS FOR COMPUTER OWNERS

211 Getting Started With Your Home Computer
212 Backup, Organize, Protect
213 Fix It Yourself
214 TLC for Micros
215 Computer User Groups

VIDEO TECHNOLOGY

221 Closed Captioning
222 Teletext
223 Videotex
224 Interactive Videodisc
225 Cable Television
226 Satellite Television

Audio- and computer-based teleconferencing are used for convening meetings, exchanging information, and involving small groups in the development of topical reports. Audioconferencing has been used primarily for Center planning activities with the advisory board and the symposium planning group.

Published announcements about the Center service have appeared in the following professional and popular publications: Exceptional Children, TEACHING Exceptional Children, The Exceptional Parent, Teaching and Computing, Education Computer News, Closing the Gap, School Microcomputing Bulletin, Classroom Computer Learning, and The Sloane Report.

The Center has also used the publications and resources of the Council for Exceptional Children and other resource groups and associations to promote the exchange of information and facilitate the referral of inquiries to the most appropriate information resource.

These activities have resulted in over 1,500 direct inquiries about Center services and requests for specific information. Users contact the Center by correspondence, regular telephone service, toll-free hotline, or electronic mail. The Center responds in several formats, including information letters, telephone, and electronic mail.

A major activity of the Center was to plan and conduct an invitational symposium for researchers investigating the use of technology with handicapped individuals. This symposium examined the status of technology-based research and the issues encountered by researchers. It also served to strengthen the exchange of information among researchers and practitioners and to establish a special data base in education technology.

Special Education Software Center

The Special Education Software Center, contracted to SRI International, serves a wide variety of people who are involved in the education of handicapped students. They include special educators, parents, software developers, the students themselves, school and State administrators, and representatives of the computer and publishing industries.

The Center has been in operation for 2 of its planned 3 years, and has become known nationally as a reliable source of information about special education software, frequently referenced by educational journals and newsletters, teacher publications, trade publications, professional associations, and hardware and software companies supplying the school market.

The Center has these functions:

- to provide users--especially educators and parents--with information about special education software that is currently available and appropriate to their needs;

- to offer software developers, classroom teachers, and administrators technical assistance in the development of software and its implementation in the classroom; and

- to host an annual, invitational conference where key decision makers in the public and private sectors discuss design and development issues, and explore ways to encourage production, distribution and use of special education software.

The Center is a major resource of information about the software that exists for handicapped students. Users can telephone toll-free an information specialist who will talk through the problem to arrive at the best software solution. Users who write for information receive a telephone call if their request needs clarification. Those who are familiar with computers and have telecommunications access use the Center's data base for online search. Many inquiries require multiple responses that increase over time, showing continued and extensive user interactions (see Figure C2).

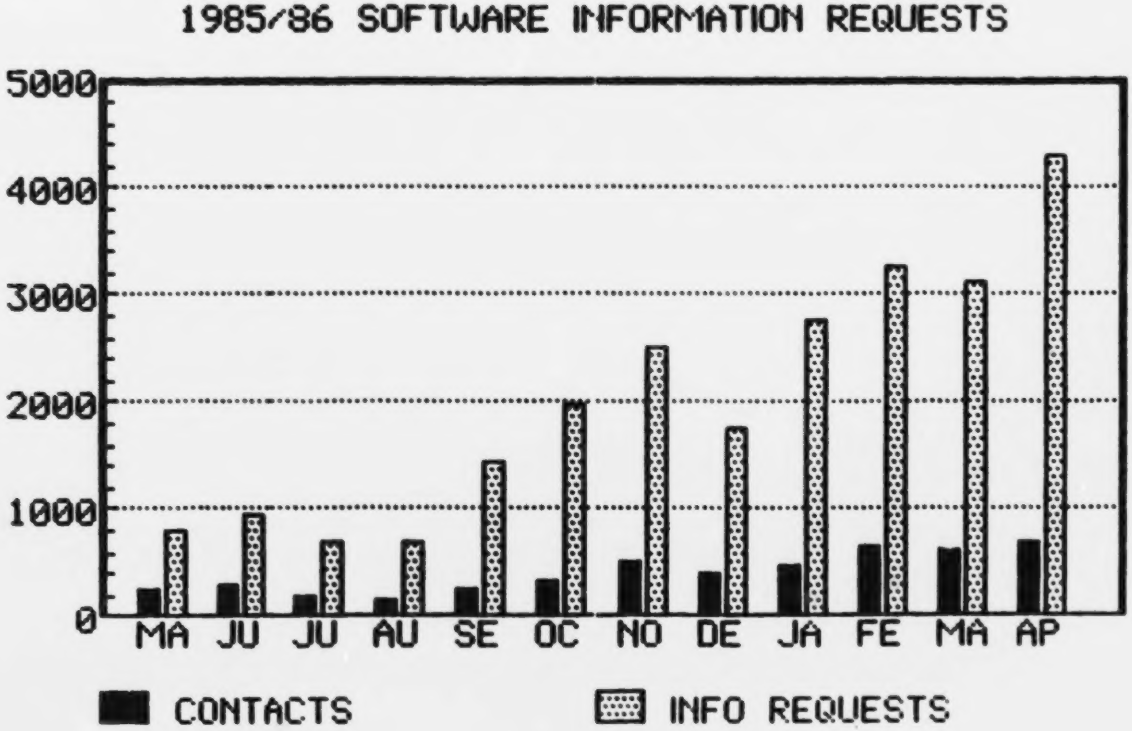
The Center has received approximately 10 times as many requests for information as was anticipated. As of April 1986, 4,600 individually tailored software descriptors had been mailed to users. This number is expected to more than double in the coming year.

Although teachers and administrators are the primary users, parents make up 10 percent, and allied health professionals another 8 percent. Generally parents who use the system have purchased computers to assist their children in the education process at home--either supplementing what they receive in school or initiating computer use where none exists elsewhere. As computer costs drop and home computers become an affordable reality, parent requests can be expected to grow.

Most inquiries (32%) are for software to assist in educating students with learning disabilities. Twenty-two percent of the inquiries concerned assistance for mentally retarded students; 10 percent were for vision-impaired students; 8 percent for hearing-impaired students, and 9 percent for physically impaired students. The Center concentrates on software for learning, rather than for accessing peripherals, so the low percentage of requests for physically handicapped students is expected. The predominance of requests for learning-disabled and mentally retarded students suggests that teachers and parents of these students have less information on software availability than do teachers of the deaf and/or vision impaired.

Most users (nearly 55%) need information about software that teaches language arts; 16 percent need information on math subjects, and 7 percent on speech and language programs. Requests for administrative software account for only 6 percent of the inquiries. This may be because software for IEP generation and other administrative software is generally well advertised and better known to special education administrators than instructional software.

Figure C2


1985/86 SOFTWARE INFORMATION REQUESTS
5000
4000
3000
2000
1000
0
MA
JU
JU
AU
SE
OC
NO
DE
JA
FE
MA
AP
CONTACTS
INFO REQUESTS

Publishers of software must respond to a rigorous set of questions concerning its goals and objectives, efficacy, and any support materials that accompany it before a descriptor of software is placed in the Center's data base. The questions posed define for publishers the needs of the special education user, thus providing a planning tool that may not have been available in the past for those entering the special education market.

The Center improves the use (and availability) of special education software through the interactions of participants in an annual invitational conference. Participants are specifically selected to represent key areas of influence in the area of special education and software generation. They include educators, administrators, researchers, parents, policy makers, software developers and publishers, and computer company representatives.

The Center's second annual conference was held in May 1986 and focused on these major areas--learning disabilities, vision and hearing impairment, and physical impairment. Discussions were held on the technologies that addressed the particular handicapping conditions, and the state of software development available to practitioners.

A number of agreements between developers and publishers were initiated during the conference, and many attendees felt they had been able to influence developers and other industry representatives in their understanding of special education concerns.

The number of times a user returns to the Center for information and help is an indicator of effectiveness. To date, more than 20 percent of requests are from users who are using the Center's resources for a second or third time.

Other indicators of effectiveness are letters from satisfied users and conference participants, as well as numerous referrals from industry (e.g., the Special Education divisions of Apple Computers, IBM, and the Publisher's Representative of Tandy Corporation), State Departments of Education (e.g., California State Department), State-wide resource centers (e.g., Florida Diagnostic and Learning Resource Centers--FDLRS), and school districts (e.g., New York City Schools).

Evaluation of EHA Discretionary Programs

During 1986, evaluation activities relating to several EHA discretionary programs were carried out under the authority contained in Parts B, Section 618, and C, Section 627, of the Act. In September 1985, a contract was awarded to COSMOS Corporation, Washington, D.C., to undertake a series of studies focusing on five programs over a 33-month period. These programs are the Handicapped Children's Early Education Program, the Special Education Personnel Development Program, the Media Services and Captioned Films/Technology Program, and the Secondary and Transmittal Services Program.

For each program, a two-phased process is being carried out, with each phase lasting approximately 6 months. The first phase consists of an analysis of the goals of the program, identification of the strategies used by the Office of Special Education Programs to implement the legislation, a description of the program logic underlying those strategies, and finally, an evaluation of whether the adopted strategies are likely to lead to improved special education programs and services.

The second phase targets one of the strategies identified during the Phase 1 goal evaluation, and attempts to gather more specific information that would help program managers improve the design and administration of programs within the Office of Special Education Programs.

During the first year of the contract, from October 1, 1986, through September 30, 1987, the goal evaluation phase (Phase 1) was completed for the Early Education and Media Services/Technology Programs, and was half completed for the Special Education Personnel Development Program. The results of the studies that were completed are described below. It should be noted that these evaluation studies are not intended to provide a basis for formulating conclusions about the program's overall effectiveness. Rather, they are intended to provide information on the degree to which program strategies and activities logically follow the intent of the legislation, thereby assisting SEP managers in identifying ways to improve program design, administration, and monitoring.

Handicapped Children's Early Education Program (HCEEP). The starting point for each goal evaluation is the statement of the major goals of the program. For HCEEP, the goals are to design experimental approaches to meet the special needs of young children with handicaps; to develop programs that facilitate the intellectual, social, physical, and language development of the children; to acquaint the community with the problems and potential of young handicapped children, to improve coordination of services at the State and local level; and to encourage parental participation and the development of services.

The methodology used for the goal evaluation employed multiple data sources and drew heavily on the assistance of SEP staff and management. Sources of information included the following: detailed reviews of project files; structured interviews with Congressional staff, SEP managers, grantees, and professionals in the field; existing literature and program planning documents; and site visits to HCEEP projects. Major components of the program that were examined included demonstrations, outreach projects, State plan grants, technical assistance, and research institutes.

In general, the goals reported by Federal and project staff were found to be congruent, although there was some discrepancy between the Federal office and the technical assistance providers for the program regarding the most desirable technical assistance approach to be taken for State plan grants. Implementation of the program appeared to be consistent with Federal expectations. Support for many of the causal assumptions determined to underlie the program logic was documented in the projects. Several kinds of data were available to document the program's success in fostering increased services for young handicapped children.

In addition to the assessment of plausibility, the evaluation report included several recommendations that were particularly relevant to the Federal administration of the program:

- Difficulties experienced by outreach projects in retaining staff and making training arrangements might be addressed by establishing a 2- or 3-year funding cycle as opposed to the current 1-year period.
- Greater coordination is needed at the Federal level between the various State planning efforts funded under EHA as well as other Federal agency planning efforts.
- Greater contact is needed between SEP project officers and project directors and staff in the field. Differences in perception of program goals and appropriate roles can result from lack of sufficient interaction between HCEEP and grantees.
- Procedures need to be developed in SEP to maintain information and track performance of projects. There is a dearth of information on the quality and richness of the program's activities that is evident primarily at the project level.

These results were included in the final goal evaluation report submitted by COSMOS Corporation on June 27, 1986. The second phase of the study--the strategy evaluation--focuses on the outreach strategy and will be completed in February 1987.

Media Services/Technology Program. The goal evaluation of the technology program, authorized as part of the Part F Media Services and Captioned Films program, was carried out between February and September 1986. The goal of the program is to increase the use of high-quality instructional media and relevant materials, and technologies to meet the educational needs of handicapped children effectively. In addition to a series of structured interviews similar to those used in the Early Education evaluation, case reviews were done on 14 of the 45 projects funded in the program over a recent 3-year period.

The most important conclusion of the report was that the program logic model is valid and that a definite link exists between program activities and the intermediate and long-range achievement goals established by Federal managers. Intermediate goals were achieved in all three of the categories established: enhanced availability, improved quality, and encouraged use of technology. As for the long-range goals, the case reviews indicated that here too, a link exists between achievement and the following kinds of program activities:

- Those directly involving educational outcomes, e.g., improved learning or educational performance;

- Those relevant to educational outcomes but only in an "enabling" way, e.g., to improve accessibility to programs;

- Those related only in an indirect way to educational outcomes, e.g., changes in teaching practice due to increased availability of technology information; and

- Those outside the educational setting entirely, e.g., establishing a network among individuals with the same type of handicapping condition.

The evaluation found that the extent of actual attainment of these goals was not well documented. Despite the fact that most of the intermediate and long-range goals of the various projects were conceptually plausible, few projects had collected evidence regarding the actual attainment of goals. A recommendation was made for the program to make greater use of evaluations designed to collect evidence about intermediate and long-range achievements. In addition, a recommendation was made that the program incorporate requirements for better quality-control procedures in funded projects to assure that products and information on technology being disseminated by the projects meet acceptable standards. This could be done either by using peer review panels to review products, undertaking needs assessment activities to increase the likelihood that products are responsive to the needs of the target audience, or requiring specific testing standards for devices that are developed by funded projects.

The strategy evaluation phase for the technology program is scheduled to begin in mid-1987.

APPENDIX D: A DESCRIPTION OF EARLY CHILDHOOD SPECIAL EDUCATION AND RELATED SERVICES

A DESCRIPTION OF EARLY CHILDHOOD SPECIAL EDUCATION AND RELATED SERVICES

This Appendix is provided in response to Section 623 the EHA, as amended by P.L. 98-199, which requires inclusion in each annual Report to Congress "a description of the status of special education and related services to handicapped children from birth through five years of age (including those receiving services through Head Start, Developmental Disabilities Program, Crippled Children's Services, Mental Health/Mental Retardation Agency, and State child-development centers and private agencies under contract with local schools)."

Section 623 (b)(4) also requires inclusion in the annual Report to Congress of activities and awards received by States and State agencies under the early education provisions of EHA. A State by State presentation of this information is provided later in this Appendix.

The Handicapped Children's Early Education Program (HCEEP) was established 16 years ago with a mandate to set up model demonstration programs for the delivery of special education and related services to young handicapped children from birth through the third grade. In the congressional hearings that led to the passage of legislation establishing HCEEP, three major needs were identified for early intervention programs: the need for locally designed ways to serve infants, young children, and their families; the need for more specific information on effective programs and techniques; and the need for distribution of visible replicable models throughout the country.

Major assumptions in establishing HCEEP were (1) that only through early intervention with tested and successful program models would those concerned with assisting handicapped children be able to provide the best services, and (2) that HCEEP should provide models of services rather than be a direct service delivery program. HCEEP was intended to provide an opportunity for any public or private nonprofit organization to develop and demonstrate high-quality services for a selected group of children and their families. It also was intended to provide an opportunity to demonstrate the effectiveness of locally designed approaches and disseminate those ideas across the nation to other agencies that might choose to use the model rather than develop their own program.

HCEEP began a small program with 24 demonstration projects. It developed through the years into a major program with six separate, complementary components. HCEEP now funds 102 demonstration projects, 24 outreach projects, 56 State Plan grant projects, four research institutes, and two technical assistance centers. The sixth and final component is the Preschool Incentive Grant program.

Public Law 98-199 has effected some changes within HCEEP. This Amendment to the Education of the Handicapped Act builds upon program development and model service delivery, and mandates State-level comprehensive service delivery systems. The law provides appropriate adjustments within HCEEP, especially the State grant component. Interagency, interdisciplinary collaborations and cooperation are emphasized, and a new grant program lends special support to States planning, developing, or implementing comprehensive service delivery systems.

The State grants component of HCEEP was introduced in 1976. State implementation grants (SIGs) were designed to help State educational agencies develop their capacity to plan for the development and expansion of early intervention services for handicapped children. SIGs helped States by making available trained personnel for needs and resource assessment and detailed planning with State-level coordination of services among agencies. SIGs were funded at various levels because of the wide diversity of State legislative mandates, appropriation levels, percentages of young children served, experience with preschool and early intervention, interagency coordinations, and resources.

In 1984-85, P.L. 98-199 instituted a new HCEEP State grant program, the State Plan grant, which is awarded to State educational agencies or other appropriate State agencies to plan, develop, and implement a comprehensive service delivery system for the provision of special education and related services to handicapped children birth to age 5 years. The State Plan grant program has replaced the SIG program with the following three types of grants:

- In the **planning** phase, projects may be funded for a maximum of two years to conduct a needs assessment and develop procedures and designs for the development of a State Plan. At the conclusion of the two-year award, States are expected to delineate the service needs within the State for young handicapped children from birth and their families, describe the types of services which are available to serve this population, and, perhaps more importantly, determine the types of services which are needed, but are not available. Interagency agreements will have been negotiated or the procedures States are utilizing to complete these agreements will be described. The operational/procedural plan which States have developed will serve as a basis for the second phase of these grants.

- In the **development** phase, projects may be funded for a maximum of three years to demonstrate their design for a comprehensive State Plan and obtain approval from the State's board of education, commissioner of education, or other designated official of the appropriate State agency. States also will be expected to summarize established and maintained standards, including regulations, legislation, and policy for making services available for the birth-to-age-5 population; describe training activities for special educators and related personnel, including primary care givers, at the State and local level; describe criteria established to evaluate effectiveness and impact of the proposed plan; and provide current demographic information on handicapped children birth to age 8 years.

- In the **implementation** phase, projects may be funded for a maximum of three years. An implementation phase grant is available to a State that has completed the development phase and obtained approval of its plan from an appropriate State agency. During this phase the pilot demonstrations begun under the development phase may be expanded to other portions of the State and territory.

P.L. 98-199 specifies that at least 30 percent of the appropriation for HCEEP is to be used for the State Plan grant component. At least ten percent of this amount is to be used for technical assistance. This legislation recognizes the key role of States in providing education for their youngest citizens and provides an opportunity for States to sustain, for a maximum of eight years, an effort to build a program of comprehensive services that reaches all handicapped children birth to age 5 years.

This year, 56 States and territories are participating in State Plan grant funding. Fifty-one of these projects are in the planning phase, four are in the development phase, and one is in the implementation phase. Of the 51 projects, 27 States are beginning their first year of State plan grant funding; 24 are in the second and final year of planning. Table D1 lists which States are in their first year of planning and those in the second year of planning. The four States in the development phase and one State in the implementation phase have also been identified.

A description of each State's activity regarding State plan grants, demonstration grants, and outreach grants is found at the end of this Appendix.

The nature of the activity through the HCEEP has been to assist in the planning, development, and implementation of a comprehensive service delivery system for young handicapped children and their families. Table D2 summarized early childhood/special education services and standards. The DES, and the ECB recognize that the development of a comprehensive system goes beyond the boundaries with which education has traditionally been involved. The need to develop and operationalize inter/intra-agency coordination is mandatory if entities are to develop and implement a comprehensive approach to provide service to children who are handicapped, at risk of developing handicapping conditions, and their families. Table D3 illustrates State early childhood/special education status and State participation in networks.

To this end of developing comprehensive service, the ECB has been working to develop and implement jointly funded projects and interagency initiatives among Federal agencies to demonstrate to the field that such activity is possible.

TABLE D1

State Plan Grant Funding Status

	FY 1984	FY 1985	FY 1986	FY 1987	FY 1988	FY 1989	FY 1990	FY 1991
Alabama	P1	P2						
Alaska	P1	P2						
Arizona	–	P1						
Arkansas	P1	P2						
California	–	P1						
Colorado	–	P1						
Connecticut	–	P1						
Delaware	–	P1						
District of Columbia	P1	P2						
Florida	–	P1						
Georgia	–	P1						
Hawaii	–	P1						
Idaho	P1	P2						
Illinois	P1	P2						
Indiana	P1	P2						
Iowa	–	P1						
Kansas	Dev1	Dev2						
Kentucky	P1	P2						
Louisiana	–	P1						
Maine	–	P1						
Maryland	–	Dev1						
Massachusetts	P1	P2						
Michigan	–	P1						
Minnesota	P1	P2						
Mississippi	P1	P2						
Missouri	P1	P2						
Montana	–	P1						
Nebraska	P1	P1						
Nevada	P1	P2						
New Hampshire	–	P1						
New Jersey	–	P1						
New Mexico	–	P1						
New York	–	P1						
North Carolina	–	P1						
North Dakota	–	Dev1						
Ohio	P1	P2						
Oklahoma	Dev1	Dev2						
Oregon	P1	P2						
Pennsylvania	P1	P2						
Rhode Island	P1	P2						
South Carolina	P1	P2						
South Dakota	–	P1						
Tennessee	–	P1						
Texas	P1	P2						
Utah	P1	P2						
Vermont	P1	P2						
Virginia	P1	P2						
Washington	–	P1						
West Virginia	–	P1						
Wisconsin	–	P1						
Wyoming	–	P1						
Guam	–	P1						
Puerto Rico	–	–						
Virgin Islands	–	P1						
American Samoa	P1	P2						
Trust Territories	–	P1						
Northern Marianas	P1	P2						

Table D2

Summary of Early Childhood/Special Education Matrix
Priority Services Areas

STATES	MANDATED SVCS.						PERMISSIVE SVCS.						GUIDELINES STANDARDS REGS., ETC.		INTERAGENCY AGREEMENTS		TEACHER CERT.	
	0	1	2	3	4	5	0	1	2	3	4	5	Yes	No	Yes	No	Yes	No
Alabama												X	X			X	X	
Alaska				X	X	X	X	X	X				X			X		X
American Samoa	X	X	X	X	X	X								X		X		X
Arizona						X								X	X		X	
Arkansas						X	X*	X*	X*	X*	X*		X		X		X	
California						X				X	X		X		X			X
Colorado						X	X	X	X	X	X		X			X		X
Connecticut				X	X	X	X	X	X					X	X		X	
Delaware	X*	X*	X*	X*	X*	X*								X	X			X
Dis. of Columbia				X	X	X								X	X			X
Florida						X	X	X	X	X	X			X	X			X
Georgia							X	X	X	X	X	X	X		X		X	
Guam	X	X	X	X	X	X								X		X		X
Hawaii				X	X	X	X	X	X				X		X		X	
Idaho	X*	X*	X*	X*	X*	X								X	X			X
Illinois				X	X	X	X	X	X					X	X		X	
Indiana										X	X	X		X		X		X
Iowa	X	X	X	X	X	X							X			X		X
Kansas						X	X	X	X	X	X		X		X			X
Kentucky												X		X		X		X
Louisiana				X	X	X	X	X	X				X		X		X	
Maine						X				X	X			X		X		X
Maryland	X	X	X	X	X	X								X	X		X	
Massachusetts				X	X	X	X	X	X				X			X		X
Michigan	X	X	X	X	X	X							X		X		X	
Minnesota					X	X	X	X	X	X			X			X	X	

*See specific state for clarification.

Table D2 (continued)

STATES	MANDATED SVCS.						PERMISSIVE SVCS.						GUIDELINES STANDARDS REGS., ETC.		INTERAGENCY AGREEMENT		TEACHER CERT.	
	0	1	2	3	4	5	0	1	2	3	4	5	Yes	No	Yes	No	Yes	No
Mississippi										X	X	X		X		X		X
Missouri						X				X	X							
Montana							X	X	X	X	X	X		X		X		X
Nebraska	X	X	X	X	X	X							X		X		X	
Nevada						X	X*	X*	X*	X*	X*		X		X			X
New Hampshire				X	X	X								X	X			X
New Jersey	X	X	X	X	X	X							X			X		X
New Mexico						X		X	X	X	X							
New York							X	X	X	X	X	X		X	X			X
North Carolina						X	X	X	X	X	X		X		X			X
North Dakota				X	X	X	X	X	X				X			X	X	
N. Mariana Is.														X	X			X
Ohio						X				X	X		X		X			X
Oklahoma	X*	X*	X*	X*			X	X	X	X			X		X			X
Oregon	X	X	X	X	X	X								X		X		X
Pacific Islands														X	X			X
Pennsylvania					X*	X				X				X		X		X
Puerto Rico						X				X	X		X		X			X
Rhode Island				X	X	X							X			X		X
South Carolina					X*	X	X	X	X	X				X		X		X
South Dakota	X	X	X	X	X	X								X	X			X
Tennessee					X	X								X		X		X
Texas	X*	X*	X*				X	X	X					X		X		X
Utah						X				X	X			X		X	X	
Vermont													X		X		X	
Virgin Islands						X				X	X							
Virginia			X	X	X	X	X	X					X		X		X	
Washington				X	X	X	X	X	X				X		X			X
West Virginia						X				X	X		X			X	X	
Wisconsin				X	X	X	X	X	X				X		X		X	
Wyoming	X*	X*	X*	X*	X*	X*								X		X		X

*See specific state for clarification.

Table D3

STATE EC/SE STATUS AND STATE PARTICIPATION IN NETWORKS

EC/SE DIMENSION**	Alabama (a, e, i)*	Alaska (a, e, i)	Arizona (a, e, g)	Arkansas (e)	California (a, d, e, f)
Legislation:					
Mandated	6-21	3-19	5-21	5-21	3-21
Permissive	5	B-2	-	no DB 0-5	0-3 (partial mandate)
Statewide Plan	no	yes	no	no	no
Statewide Planning Advisory Group	no	no	yes	no	yes
Statewide Needs Assessment	yes	yes (partial)	yes	no	yes
Early Childhood TA/ In-service Training	yes materials: no	yes materials: no	yes materials: no	no	yes materials: yes
Early Childhood Teacher Certification	yes	no	no	no	no
Interagency Agreements	no	developing	no	no	6
Early Childhood Guidelines	no	no	yes	no	yes
Early Childhood Rules/ Regulations	no	yes	no	no	as apply to all handl. children
Statewide Tracking System	developing	no	no	no	no
Distribution of Resource Materials	no	yes	no	no	yes
Efficacy Data	no	no	yes (limited)	no	yes

*Letter notations about state partcipation in networks:

[a] States formerly having U.S. Department of Education Handicapped Children's Early Education Program (HCEEP) State Implementation Grant (SIG) projects

[b] States with U.S. Department of Health and Human Services and Maternal and Child Health (MCH) 0-3 Projects and National Center for Clinical Infant Programs (NCCIP)

[c] States formerly a part of MCH/BEH's "Six State Collaborative Projects"

[d] States with MCH and Georgetown University "Network" projects

[e] States with U.S. Department of Education HCEEP State Plan Grants

[f] States formerly having American Academy of Pediatrics (AAP) and National Association of State Directors of Special Education (NASDSE) Interagency projects

[g] States with U.S. Department of Health and Human Services demonstration projects concerning integrated service delivery systems

[h] States with U.S. Department of Education Plan Grants concerning severely handicapped

[i] States with National Institute of Mental Health (NIMH) grants for Child and Adolescent Service System Programs (CASSP)

**See notations on page 14

Table D3 (continued)

STATE EC/SE STATUS AND STATE PARTICIPATION IN NETWORKS

EC/SE DIMENSION	Colorado (a, d, e, f)	Connecticut (a, c, d, e)	Delaware (a, d, e, i)	D. C. (a, d, e)	Florida (a, b, d, e, g)
Legislation: Mandated Permissive	5-21 B-5	3-21 B-3	B-2=D,B,DB, Autistic 3=OH,SMH,TMH 4-5=other no. permis.	Bd of Ed Rules 3-21 years	K-grade 12 B-K
Statewide Plan	no	yes	no	no	no
Statewide Planning Advisory Group	yes	yes	yes	no	no
Statewide Needs Assessment	no	yes	yes	no	no
Early Childhood TA/ In-service Training	yes materials: no	yes materials: yes	yes materials: no	yes	yes materials: yes
Early Childhood Teacher Certification	yes	developing	yes	yes	no
Interagency Agreements	5	2	1	yes	3
Early Childhood Guidelines	yes	yes	no	no	no
Early Childhood Rules/ Regulations	no	yes	yes	no	no
Statewide Tracking System	no	no	yes	no	yes
Distribution of Resource Materials	no	yes	no	yes	yes
Efficacy Data	yes	no	no	no	no

[a] States formerly having U.S. Department of Education Handicapped Children's Early Education Program (HCEEP) State Implementation Grant (SIG) projects

[b] States with U.S. Department of Health and Human Services and Maternal and Child Health (MCH) 0-3 Projects and National Center for Clinical Infant Programs (NCCIP)

[c] States formerly a part of MCH/BEH's "Six State Collaborative Projects"

[d] States with MCH and Georgetown University "Network" projects

[e] States with U.S. Department of Education HCEEP State Plan Grants

[f] States formerly having American Academy of Pediatrics (AAP) and National Association of State Directors of Special Education (NASDSE) interagency projects

[g] States with U.S. Department of Health and Human Services demonstration projects concerning integrated service delivery systems

[h] States with U.S. Department of Education Plan Grants concerning severely handicapped

[i] States with National Institute of Mental Health (NIMH) grants for Child and Adolescent Service System Programs (CASSP)

Table D3 (continued)

STATE EC/SE STATUS AND STATE PARTICIPATION IN NETWORKS

EC/SE DIMENSION	Georgia (a, e, h, i)	Hawaii (a, b, c, d, e, h, i)	Idaho (a, e, i)	Illinois (a, g, h, i)	Indiana (a, e, i)
Legislation: Mandated Permissive	 6-18 0-5	 3-20 under 3 (Dept. of Health)	 6-21 kindergarten optional	 3-21 B-3	 6-18 3-5
Statewide Plan	no	yes	yes	no	no
Statewide Planning Advisory Group	no	yes	no	yes	yes
Statewide Needs Assessment	no	yes	yes	no	yes
Early Childhood TA/ In-service Training	yes materials: no	yes materials: yes	yes materials: no	upon request	yes materials: no
Early Childhood Teacher Certification	yes	yes: under revision	no	yes	no
Interagency Agreements	2	6	4	no	no
Early Childhood Guidelines	no in process	yes	no	no	no
Early Childhood Rules/ Regulations	no in process	yes	no	yes in-state	yes
Statewide Tracking System	no	yes	yes	no	no
Distribution of Resource Materials	no	yes	yes	no	yes
Efficacy Data	no	developing	no	no	no

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[a] States formerly having U.S. Department of Education Handicapped Children's Early Education Program (HCEEP) State Implementation Grant (SIG) projects

[b] States with U.S. Department of Health and Human Services and Maternal and Child Health (MCH) 0-3 Projects and National Center for Clinical Infant Programs (NCCIP)

[c] States formerly a part of MCH/BEH's "Six State Collaborative Projects"

[d] States with MCH and Georgetown University "Network" projects

[e] States with U.S. Department of Education HCEEP State Plan Grants

[f] States formerly having American Academy of Pediatrics (AAP) and National Association of State Directors of Special Education (NASDSE) interagency projects

[g] States with U.S. Department of Health and Human Services demonstration projects concerning integrated service delivery systems

[h] States with U.S. Department of Education Plan Grants concerning severely handicapped

[i] States with National Institute of Mental Health (NIMH) grants for Child and Adolescent Service System Programs (CASSP)

Table D3 (continued)

STATE EC/SE STATUS AND STATE PARTICIPATION IN NETWORKS

EC/SE DIMENSION	Iowa (a, b, c, d, e, f)	Kansas (a, b, e, h, i)	Kentucky (e, i)	Louisiana (a, c, d, e, i)	Maine (a, b, d, e, g, i)
Legislation:					
Mandated	B-21	5-21	6-18	3-5	5-20
Permissive	-	B-4	5	B-2	3-5
Statewide Plan	yes	yes	no	no	yes
Statewide Planning Advisory Group	yes	yes	no	no	yes
Statewide Needs Assessment	yes	yes	no	no	yes
Early Childhood TA/ In-service Training	yes materials: yes	yes materials: yes	yes materials: yes	yes materials: yes	yes materials: in process
Early Childhood Teacher Certification	yes	yes	no	yes	no
Interagency Agreements	1	17	2	3	no (only informal)
Early Childhood Guidelines	yes	yes	no	no	in process
Early Childhood Rules/ Regulations	yes	yes	no	yes	yes
Statewide Tracking System	yes	developing	no	no	developing
Distribution of Resource Materials	yes	yes	yes	yes	yes
Efficacy Data	no	developing	in process	no	completed

[a] States formerly having U.S. Department of Education Handicapped Children's Early Education Program (HCEEP) State Implementation Grant (SIG) projects

[b] States with U.S. Department of Health and Human Services and Maternal and Child Health (MCH) 0-3 Projects and National Center for Clinical Infant Programs (NCCIP)

[c] States formerly a part of MCH/BEH's "Six State Collaborative Projects"

[d] States with MCH and Georgetown University "Network" projects

[e] States with U.S. Department of Education HCEEP State Plan Grants

[f] States formerly having American Academy of Pediatrics (AAP) and National Association of State Directors of Special Education (NASDSE) Interagency projects

[g] States with U.S. Department of Health and Human Services demonstration projects concerning integrated service delivery systems

[h] States with U.S. Department of Education Plan Grants concerning severely handicapped

[i] States with National Institute of Mental Health (NIMH) grants for Child and Adolescent Service System Programs (CASSP)

Table D3 (continued)

STATE EC/SE STATUS AND STATE PARTICIPATION IN NETWORKS

EC/SE DIMENSION	Maryland (a, b, d, e)	Massachusetts (a, b, e)	Michigan (e)	Minnesota (a, d, e, h)	Mississippi (e, i)
Legislation: Mandated Permissive	 B-20 -	 3-21 0-3	 B-26 -	 4-5 B-3	 6-21 0-5
Statewide Plan	yes	yes	yes	no	no
Statewide Planning Advisory Group	yes	yes	yes	yes	yes
Statewide Needs Assessment	yes	yes	yes	no	yes
Early Childhood TA/ In-service Training	yes materials: yes	yes materials: yes	yes materials: no	yes	yes materials: no
Early Childhood Teacher Certification	yes	yes	yes	yes	no
Interagency Agreements	3	1	1	yes	yes
Early Childhood Guidelines	no	no	no	no	no
Early Childhood Rules/ Regulations	no	yes	yes	yes	yes
Statewide Tracking System	yes	no	no	no	no
Distribution of Resources Materials	yes	yes	yes	no	no
Efficacy Data	no	developing	no	no	no

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[a] States formerly having U.S. Department of Education Handicapped Children's Early Education Program (HCEEP) State Implementation Grant (SIG) projects

[b] States with U.S. Department of Health and Human Services and Maternal and Child Health (MCH) 0-3 Projects and National Center for Clinical Infant Programs (NCCIP)

[c] States formerly a part of MCH/BEH's "Six State Collaborative Projects"

[d] States with MCH and Georgetown University "Network" projects

[e] States with U.S. Department of Education HCEEP State Plan Grants

[f] States formerly having American Academy of Pediatrics (AAP) and National Association of State Directors of Special Education (NASDSE) Interagency projects

[g] States with U.S. Department of Health and Human Services demonstration projects concerning integrated service delivery systems

[h] States with U.S. Department of Education Plan Grants concerning severely handicapped

States with National Institute of Mental Health (NIMH) grants for Child and Adolescent Service System Programs (CASSP)

Table D3 (continued)

STATE EC/SE STATUS AND STATE PARTICIPATION IN NETWORKS

EC/SE DIMENSION	Missouri (a, d, e, f)	Montana (a, e, h)	Nebraska (a, e, i)	Nevada (a, e)	New Hampshire (a, e)
Legislation: Mandated Permissive	 5 3-4	 6-18 0-5	 3-21 -	 5-21 0-5 & HI 3 for MR	 3-21 -
Statewide Plan	no	yes	yes	yes	no
Statewide Planning Advisory Group	yes	yes	no	yes	yes
Statewide Needs Assessment	yes	no (developing)	yes	yes	yes
Early Childhood TA/ In-service Training	yes	yes	yes materials: yes	yes materials: yes	yes materials: no
Early Childhood Teacher Certification	yes	no	yes	yes	no developing
Interagency Agreements	no	4	2	1	1
Early Childhood Guidelines	yes	no	no	yes	developing
Early Childhood Rules/ Regulations	yes	no	yes	as apply to all handi.	as apply to all handi. 3-21
Statewide Tracking System	no	no	yes	no	yes
Distribution of Resource Materials	no	yes	yes	yes	developing
Efficacy Data	no	no	no	no	no

[a] States formerly having U.S. Department of Education Handicapped Children's Early Education Program (HCEEP) State Implementation Grant (SIG) projects

[b] States with U.S. Department of Health and Human Services and Maternal and Child Health (MCH) 0-3 Projects and National Center for Clinical Infant Programs (NCCIP)

[c] States formerly a part of MCH/BEH's "Six State Collaborative Projects"

[d] States with MCH and Georgetown University "Network" projects

[e] States with U.S. Department of Education HCEEP State Plan Grants

[f] States formerly having American Academy of Pediatrics (AAP) and National Association of State Directors of Special Education (NASDSE) interagency projects

[g] States with U.S. Department of Health and Human Services demonstration projects concerning integrated service delivery systems

[h] States with U.S. Department of Education Plan Grants concerning severely handicapped

[i] States with National Institute of Mental Health (NIMH) grants for Child and Adolescent Service System Programs (CASSP)

Table D3 (continued)

STATE EC/SE STATUS AND STATE PARTICIPATION IN NETWORKS

EC/SE DIMENSION	New Jersey (a, b, d, e, f, i)	New Mexico (d, e)	New York (a, b, d, e, i)	North Carolina (a, b, e)	North Dakota (a, e)
Legislation: Mandated Permissive	 B-5 -	 5-21 (phase-in 3-4 DD by 1988) 1-4	 5-21 B-5	 5-21 B-4	 3-5 (DD/DHS) B-2
Statewide Plan	yes	yes	yes	no	yes
Statewide Planning Advisory Group	no	yes	yes	yes	yes
Statewide Needs Assessment	no	no (in process)	yes	for 3-4 only	yes
Early Childhood TA/ In-service Training	yes materials: yes	no	yes materials: yes	yes materials: yes	yes materials: no
Early Childhood Teacher Certification	no proposed	no	no	no	yes
Interagency Agreements	3	2	4+	1	2
Early Childhood Guidelines	yes	no under another agency	yes	yes	yes
Early Childhood Rules/ Regulations	yes	no under another agency	no	as apply to all handi. children	yes
Statewide Tracking System	no	no	no	no	no
Distribution of Resource Materials	no	no	yes	yes	no
Efficacy Data	no	no	no	yes	no

[a] States formerly having U.S. Department of Education Handicapped Children's Early Education Program (HCEEP) State Implementation Grant (SIG) projects

[b] States with U.S. Department of Health and Human Services and Maternal and Child Health (MCH) 0-3 Projects and National Center for Clinical Infant Programs (NCCIP)

[c] States formerly a part of MCH/BEH's "Six State Collaborative Projects"

[d] States with MCH and Georgetown University "Network" projects

[e] States with U.S. Department of Education HCEEP State Plan Grants

[f] States formerly having American Academy of Pediatrics (AAP) and National Association of State Directors of Special Education (NASDSE) Interagency projects

[g] States with U.S. Department of Health and Human Services demonstration projects concerning integrated service delivery systems

[h] States with U.S. Department of Education Plan Grants concerning severely handicapped

[i] States with National Institute of Mental Health (NIMH) grants for Child and Adolescent Service System Programs (CASSP)

Table D3 (continued)

STATE EC/SE STATUS AND STATE PARTICIPATION IN NETWORKS

EC/SE DIMENSION	Ohio (a, b, d, e, i)	Oklahoma (a, e, g, i)	Oregon (b, c, d, e)	Pennsylvania (a, e, i)	Rhode Island (a, e)
Legislation:					
Mandated	5-21	B-3=DB, Failing to Thrive&4-21	B-21 (severe chronic DD for 0-5)	3-5	3-5
Permissive	3-4	B-3		0-5	-
Statewide Plan	yes	no	no	no	no
Statewide Planning Advisory Group	yes	yes	no	yes	no
Statewide Needs Assessment	yes	no (in process)	no (in process)	no	no (in process)
Early Childhood TA/ In-service Training	yes materials: yes	yes materials: no	no	yes	yes materials: no
Early Childhood Teacher Certification	no	no	no	no	yes
Interagency Agreements	3	1	4	2	no
Early Childhood Guidelines	no	no	yes	yes	no
Early Childhood Rules/ Regulations	as apply to all handi. children	yes	yes	limited-yes	yes
Statewide Tracking System	yes	no	no	yes	yes
Distribution of Resource Materials	yes	no	no	yes	no
Efficacy Data	in process	no	no	no	no

[a] States formerly having U.S. Department of Education Handicapped Children's Early Education Program (HCEEP) State Implementation Grant (SIG) projects

[b] States with U.S. Department of Health and Human Services and Maternal and Child Health (MCH) 0-3 Projects and National Center for Clinical Infant Programs (NCCIP)

[c] States formerly a part of MCH/BEH's "Six State Collaborative Projects"

[d] States with MCH and Georgetown University "Network" projects

[e] States with U.S. Department of Education HCEEP State Plan Grants

[f] States formerly having American Academy of Pediatrics (AAP) and National Association of State Directors of Special Education (NASDSE) interagency projects

[g] States with U.S. Department of Health and Human Services demonstration projects concerning integrated service delivery systems

[h] States with U.S. Department of Education Plan Grants concerning severely handicapped

[i] States with National Institute of Mental Health (NIMH) grants for Child and Adolescent Service System Programs (CASSP)

Table D3 (continued)

STATE EC/SE STATUS AND STATE PARTICIPATION IN NETWORKS

EC/SE DIMENSION	South Carolina (d, e, f, g)	South Dakota (a, e)	Tennessee (a, e, i)	Texas (b, d, e)	Utah (b, c, d, e)
Legislation:					
Mandated	4=VI & HI 5-18	3-5	4-21	B-2=VI,HI,DB 3-21	5-21
Permissive	B-4	-	-	B-2	3-5
Statewide Plan	yes	no	no	yes	no
Statewide Planning Advisory Group	yes	yes	yes	yes	yes
Statewide Needs Assessment	yes	no	yes	no	no (in process)
Early Childhood TA/ In-service Training	yes materials: no	yes materials: yes	no	yes materials: yes	yes materials: yes
Early Childhood Teacher Certification	no	no	no	yes	no
Interagency Agreements	4	4	no	no	yes
Early Childhood Guidelines	no	yes	no	yes	no
Early Childhood Rules/ Regulations	yes	yes	no	yes	no
Statewide Tracking System	no	no	no	yes	developing
Distribution of Resource Materials	yes	no	yes	no	some
Efficacy Data	no	no	no	yes	no

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[a] States formerly having U.S. Department of Education Handicapped Children's Early Education Program (HCEEP) State Implementation Grant (SIG) projects

[b] States with U.S. Department of Health and Human Services and Maternal and Child Health (MCH) 0-3 Projects and National Center for Clinical Infant Programs (NCCIP)

[c] States formerly a part of MCH/BEH's "Six State Collaborative Projects"

[d] States with MCH and Georgetown University "Network" projects

[e] States with U.S. Department of Education HCEEP State Plan Grants

[f] States formerly having American Academy of Pediatrics (AAP) and National Association of State Directors of Special Education (NASDSE) Interagency projects

[g] States with U.S. Department of Health and Human Services demonstration projects concerning integrated service delivery systems

[h] States with U.S. Department of Education Plan Grants concerning severely handicapped

[i] States with National Institute of Mental Health (NIMH) grants for Child and Adolescent Service System Programs (CASSP)

Table D3 (continued)

STATE EC/SE STATUS AND STATE PARTICIPATION IN NETWORKS

EC/SE DIMENSION	Vermont (a, e, i)	Virginia (a, d)	Washington (a, b, e)	West Virginia (a, e)	Wisconsin (a, e, i)
Legislation: Mandated Permissive	 6-22 0-5	 2-5 0-2	 3-5 0-3	 5-23 (phase in 3-4 sev. handi. by 1987) 3-4 (permissive for mild/moderate)	 3-5 0-2
Statewide Plan	no	yes	yes	no	yes
Statewide Planning Advisory Group	no	no	yes	yes	yes
Statewide Needs Assessment	no	no (in process)	yes	no	yes
Early Childhood TA/ In-service Training	no	yes materials: yes	yes materials: yes	yes materials: yes	yes materials: yes
Early Childhood Teacher Certification	yes	yes	no	yes undergraduate	yes
Interagency Agreements	3	2	2	2 (county level)	2
Early Childhood Guidelines	yes	yes	yes	no	no
Early Childhood Rules/ Regulations	yes	yes	yes revising	yes	yes
Statewide Tracking System	no	no	no	no	no
Distribution of Resource Materials	no	no	yes	no	yes
Efficacy Data	no	no	yes	no	developing

[a] States formerly having U.S. Department of Education Handicapped Children's Early Education Program (HCEEP) State Implementation Grant (SIG) projects

[b] States with U.S. Department of Health and Human Services and Maternal and Child Health (MCH) 0-3 Projects and National Center for Clinical Infant Programs (NCCIP)

[c] States formerly a part of MCH/BEH's "Six State Collaborative Projects"

[d] States with MCH and Georgetown University "Network" projects

[e] States with U.S. Department of Education HCEEP State Plan Grants

[f] States formerly having American Academy of Pediatrics (AAP) and National Association of State Directors of Special Education (NASDSE) interagency projects

[g] States with U.S. Department of Health and Human Services demonstration projects concerning integrated service delivery systems

[h] States with U.S. Department of Education Plan Grants concerning severely handicapped

[i] States with National Institute of Mental Health (NIMH) grants for Child and Adolescent Service System Programs (CASSP)

Table D3 (continued)

STATE EC/SE STATUS AND STATE PARTICIPATION IN NETWORKS

EC/SE DIMENSION	Wyoming (a, e)	Bureau of Indian Affairs	Guam (e)	Puerto Rico (a)
Legislation: Mandated Permissive	 B-5=H&SS school age-21	 5-21 3-4	 B-21	 5 3-4
Statewide Plan	no	no	no	no
Statewide Planning Advisory Group	yes	yes	no	yes
Statewide Needs Assessment	yes	yes	no	no
Early Childhood TA/ In-service Training	no	yes materials: no	no	yes
Early Childhood Teacher Certification	no	no	developing	no
Interagency Agreements	1	yes	4	5
Early Childhood Guidelines	no	no	developing	no
Early Childhood Rules/ Regulations	no	developing	developing	yes
Statewide Tracking System	no	no	yes	yes
Distribution of Resource Materials	no	yes	yes	yes
Efficacy Data	no	no	yes	no

[a] States formerly having U.S. Department of Education Handicapped Children's Early Education Program (HCEEP) State Implementation Grant (SIG) projects

[b] States with U.S. Department of Health and Human Services and Maternal and Child Health (MCH) 0-3 Projects and National Center for Clinical Infant Programs (NCCIP)

[c] States formerly a part of MCH/BEH's "Six State Collaborative Projects"

[d] States with MCH and Georgetown University "Network" projects

[e] States with U.S. Department of Education HCEEP State Plan Grants

[f] States formerly having American Academy of Pediatrics (AAP) and National Association of State Directors of Special Education (NASDSE) interagency projects

[g] States with U.S. Department of Health and Human Services demonstration projects concerning integrated service delivery systems

[h] States with U.S. Department of Education Plan Grants concerning severely handicapped

[i] States with National Institute of Mental Health (NIMH) grants for Child and Adolescent Service System Programs (CASSP)

Table D3 (continued)

STATE EC/SE STATUS AND STATE PARTICIPATION IN NETWORKS

EC/SE DIMENSION	Trust Territories of the Pacific (e)	Virgin Islands (a, e)	American Samoa (a, e)	Northern Mariana Islands (e)
Legislation:				
Mandated	Under 21	5	B-21	3-21
Permissive	-	3-5	-	B-3
Statewide Plan	yes	no	no	no
Statewide Planning Advisory Group	yes	yes	no	no
Statewide Needs Assessment	no	no (in process)	no (in process)	no (in process)
Early Childhood TA/ In-service Training	yes	yes	yes	no
Early Childhood Teacher Certification	no	no	no	no
Interagency Agreements	7-9	yes	1	5
Early Childhood Guidelines	no	no	no	no
Early Childhood Rules/ Regulations	no	no	no	no
Statewide Tracking System	no	yes	no	no
Distribution of Resource Materials	no	no	no	no
Efficacy Data	limited	no	no	no

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[a] States formerly having U.S. Department of Education Handicapped Children's Early Education Program (HCEEP) State Implementation Grant (SIG) projects

[b] States with U.S. Department of Health and Human Services and Maternal and Child Health (MCH) 0-3 Projects and National Center for Clinical Infant Programs (NCCIP)

[c] States formerly a part of MCH/BEH's "Six State Collaborative Projects"

[d] States with MCH and Georgetown University "Network" projects

[e] States with U.S. Department of Education HCEEP State Plan Grants

[f] States formerly having American Academy of Pediatrics (AAP) and National Association of State Directors of Special Education (NASDSE) interagency projects

[g] States with U.S. Department of Health and Human Services demonstration projects concerning integrated service delivery systems

[h] States with U.S. Department of Education Plan Grants concerning severely handicapped

[i] States with National Institute of Mental Health (NIMH) grants for Child and Adolescent Service System Programs (CASSP)

Table D3 (continued)

SYNOPSIS OF STATES OF TYPE OF FEDERAL PROGRAM NETWORKS

States formerly having U.S. Department of Education HCEEP State Implementation Grant (SIG) projects (44):

Alabama
Alaska
Arizona
California
Colorado
Connecticut
Delaware
D.C.
Florida
Georgia
Hawaii
Idaho
Illinois
Indiana
Iowa
Kansas
Louisiana
Maine
Maryland
Massachusetts
Minnesota
Missouri
Montana
Nebraska
Nevada
New Hampshire
New Jersey
New York
North Carolina
North Dakota
Ohio
Oklahoma
Pennsylvania
Rhode Island
South Dakota
Tennessee
Virginia
Washington
West Virginia
Wisconsin
Wyoming
Puerto Rico
Virgin Islands
American Samoa

States with U.S. Department of Health and Human Services (HHS) and Maternal and Child Health (MCH) 0-3 Projects with NCCIP (15):

Florida
Hawaii
Iowa
Kansas
Maine
Maryland
Massachusetts
New Jersey
New York
North Carolina
Ohio
Oregon
Texas
Utah
Washington

States formerly a part of MCH/BEH's "Six State Collaborative and Interagency Projects" (6):

Connecticut
Iowa
Oregon
Hawaii
Louisiana
Utah

States with MCH and Georgetown University "Network" for interagency collaboration projects (21):

California
Colorado
Connecticut
Delaware
District of Columbia
Florida
Hawaii
Iowa
Louisiana
Maine
Maryland
Minnesota
Missouri
New Jersey
New Mexico
New York
Ohio
Oregon
South Carolina
Texas
Utah

States with U.S. Department of Education HCEEP State Plan Grants as of October 1, 1985 (56):

Alabama
Alaska
Arizona
Arkansas
California
Colorado
Connecticut
Delaware
D.C.
Florida
Georgia
Hawaii
Idaho
Illinois
Indiana
Iowa
Kansas
Kentucky
Louisiana
Maine
Maryland
Massachusetts
Michigan
Minnesota
Mississippi
Missouri
Montana
Nebraska
Nevada
New Hampshire
New Jersey
New Mexico
New York
North Carolina
North Dakota
Ohio
Oklahoma
Oregon
Pennsylvania
Rhode Island
South Carolina
South Dakota
Tennessee
Texas
Utah
Vermont
Virginia
Washington
West Virginia
Wisconsin
Wyoming
Guam
Trust Territories of the Pacific
Virgin Islands
American Samoa
Northern Mariana Islands

States formerly having American Academy of Pediatrics and NASDSE interagency projects (6):

California
Iowa
New Jersey
Colorado
Missouri
South Carolina

States with HHS demonstration projects concerning integrated service delivery systems for human services (5):

Arizona
Florida
Maine
Oklahoma
South Carolina

States formerly having or with State Plan Grants concerning severely handicapped (13):

Alaska
Arizona
Colorado
Connecticut
Georgia
Hawaii
Illinois
Kansas
Minnesota
Montana
Texas
Utah
Vermont
Montana

States having Child and Adolescent Service System Programs (22):

Alabama
Alaska
Delaware
Georgia
Hawaii
Idaho
Illinois
Indiana
Kansas
Kentucky
Louisiana
Maine
Mississippi
Nebraska
New Jersey
New York
Ohio
Oklahoma
Pennsylvania
Tennessee
Vermont
Wisconsin

All states and territories participate in Preschool Incentive Grant Program (Section 619) except the following:

Trust Territories of the Pacific
Northern Mariana Islands

Table D3 (continued)

NOTATIONS

I. Abbreviations Used in the Matrix

B = birth
D = deaf
DB = deaf-blind
DD = developmental disabilities
OH = orthopedically impaired
DHS = department of health services
H = health
HI = hearing impaired
K = kindergarten
MR = mentally retarded
SMH = severely mentally handicapped
SS = social services
TMH = trainable mentally handicapped
VI = vision impaired

II. Descriptions about EC/SE Dimensions

A. Legislation -- state laws passed to address the early childhood/special education needs of young handicapped children

1. Mandated -- state must serve children of the ages (in years) and handicapping conditions specified

2. Permissive -- states may (if they choose to do so) serve children younger than the required school age

B. Statewide Plan -- state has a plan for the provision of early childhood special education services

C. Statewide Planning/Advisory Group -- state has a group or task force composed of professionals, parents, and others to deal with concerns and plans for EC/SE services

D. Statewide Needs Assessment -- state has conducted and compiled information about EC/SE services provided or available

E. Early Childhood TA/In-service Training -- state provides technical assistance and training to professionals and others

F. Early Childhood Teacher Certification -- state certificate (permanent or provisional endorsement or credential) ensures that a teacher is qualified to work with young handicapped children

G. Interagency Agreements -- state has developed formal and informal agreements with other agencies (e.g., health, social services, HeadStart) that relate to services to young handicapped children

H. Early Childhood Guidelines -- state has written guidelines which suggest or recommend sound EC/SE practices

I. Early Childhood Rules/Regulations -- state has written standards that specify or require minimum ground rules for EC/SE that must be followed

J. Statewide Tracking System -- state has a system for tracking or following indiviudal children through EC/SE services

K. Distribution of Resource Materials -- state has both printed and audiovisual EC/SE materials available to share with others

L. Efficacy Data -- state has sponsored a study about the effectivenss of EC/SE services

During the course of the year, ECB staff have developed programmatic relationships between and among various programs to facilitate change at the State and local level.

The following represents information gathered from several Federal agencies who have similar mandates to serve handicapped children. Each will be presented independently.

Maternal and Child Health/Crippled Children

In 1934, there were many children in this country who had been physically crippled by such health problems as paralytic poliomyelitis, cerebral palsy, and congenital skeletal anomalies. Few of those children, however, had access to the rehabilitation services they needed because the private medical care system was not prepared to provide the services and there was no public medical care system to provide the services. The lack of access of the nation's crippled children to the then existing diagnostic, treatment, and rehabilitation services was of great concern to those who were responsible for conducting public health services for children as well as to the general public. From this concern a new and revolutionary concept evolved -- the concept that each State should have a public health program specifically for crippled children.

This concept led to the enactment of Title V of the Social Security Act which stated that financial assistance was being provided the States:

> "For the purpose of enabling each State to extend and improve (especially in rural areas and in areas suffering from severe economic distress), as far as practicable under the conditions in such State...services for location, and for medical, surgical, corrective, and other services and care for and facilities for diagnosis, hospitalization, aftercare for, children who are crippled or who are suffering from conditions which lead to crippling..." Title V - MCH and CC Services: Sec. 501.

In many States, the moving force behind the implementation of the Title V legislation was a well known orthopedic surgeon or an established children's orthopedic hospital. Consequently, many State crippled children's programs were developed to provide orthopedic services. As recently as a few years ago, a few State crippled children's programs continued to limit their services to children with orthopedic problems. The majority of States however, soon came to recognize that a child's ability to function could be limited as a result of a chronic or recurring systemic illness just as it could be limited by an orthopedic problem. Accordingly, most CC programs were soon expanded to include chronic and recurring health problems. Many States also came to recognize that a number of health related problems can be handicapping. Therefore, many State CC programs have become involved with providing services for children with developmental, behavioral, and educational problems. Most recently, CC programs have recognized needs of children, such as ventilator-dependent children, who have complex health problems that require high-tech care in their homes. Since

State CC programs are not organized, staffed or funded to provide services for this new generation of handicapping health problems, it will be necessary for most of these programs to make major changes in their provision of rehabilitation services in order to serve these children.

Since the enactment of Title V of the Social Security Act in 1935 many changes have occurred in these programs. Changes have been made in the services provided by these programs, their methods of providing services, their administration, and the financing of services. Just as there were medical, social, and economic factors in the past that prompted changes in the State CC programs, there are medical, social, and economic factors at this time that make it necessary to make changes in the programs.

The changes that have occurred in the population of children served by State CC programs is illustrated by the fact that many State CC programs now serve any child who has a health or health-related problem that limits the child's ability to achieve his full potential. Although the State CC programs have come a long way from the orthopedically oriented programs of the 1930's, not all State CC programs have been modernized to provide services for children who are, by modern definition, handicapped and chronically ill. As a result, far too many of these children do not have access to contemporary services.

There is no doubt that the goal of the State CC programs should be to assure that children with the broad spectrum of health and health-related problems which produce handicapping conditions and chronic illnesses have access to contemporary services.

During the last 50 years, the many physicians, occupational therapists, physical therapists, speech and hearing consultants, psychologists, nurses, social workers and other health professionals who have worked in the State CC programs have developed a body of knowledge about the professional services needed by children with each of the very different conditions that cause children to be handicapped or chronically ill. Drawing upon that knowledge and experience, the Federal Office of Maternal and Child Health developed guidelines for the services to be provided children enrolled in the State CC programs and issued regulations requiring the State CC programs to develop standards of care that would determine how these would be provided. The establishment of standards of care by State CC programs has done much to assure that handicapped and chronically ill children receive needed services of high quality.

As a result of the aforementioned Federal-State efforts, State CC programs provide and finance care based on the following general principles:

- Care must be family-based.
- Care must be personalized.
- Coordinated interprofessional team care must be available because most handicapped children have more than one problem.

- Each child must have an individual plan of care.
- There must be a clearly defined focus of responsibility for assisting the family to carry out the care plan.
- The cost of service must not impoverish the family.

Finally, it should be noted that while the Federal government has played an important role in fostering the establishment of quality assurance standards, with the enactment of the Federal Maternal and Child Health Block Grant legislation, the primary responsibility for this matter has been given to the States.

To be certain that handicapped and chronically ill children would have access to needed services, the State CC programs developed the State CC delivery system of services. This system of services is made up of several components that include Statewide clinic services and physician services, interprofessional team services, follow-up care management services, administrative services and payment for hospital, medical and nonmedical providers. This is not to say that each State crippled children's program is involved with providing the same services. It is to say that essentially all State CC programs provide or assure the availability of the following services.

With few exceptions, State CC programs conduct a Statewide system of clinics that provide ambulatory diagnostic, treatment, and planning services, and these clinics constitute the major public medical care system for providing ambulatory care services for the nation's handicapped children. The services provided in these clinics are generally secondary level services, i.e., they neither provide primary services nor do they provide the complex tertiary services. These clinics primarily provide examinations to determine if a child's problem can be appropriately treated in the community. If so, recommendations concerning therapy that should be provided are made to the professionals in the community who are going to be responsible for providing the therapy in the child's home and community. If the child's problem requires tertiary diagnosis and treatment, a referral is made to a medical center. The clinic can in many cases provide the follow-up examinations and treatment recommended by the tertiary center, thus saving the family the cost and the trouble related to traveling to a medical center.

Specific data from MCH as to numbers of handicapped children receiving services, types of disabilities served, numbers of handicapped children referred to the program, providers of care or service etc. are not available. MCH does not require State agencies to report data other than what might be included through a national survey or from the National Center for Health Statistics. To extract information from what data presently exists is an impossible task, since the definitions/categories used by MCH are inconsistent with that used by OSEP.

Through a grant to McManus Health Policy, Inc. entitled Financing Data Task Force for Chronically Ill Children, MCH hopes to be able to answer a range of health and financing related questions, such as:

1) What are the prevalence rates of children with chronic illness?, and 2) what portion of children's medical bills are covered by third party payers? The data to be gathered will include cells which reflect demographic, risk factors, health status, severity of illness, utilization of health services, delivery system characteristics, health care expenditures, source of payment and other related areas. This guide will be a valuable reference tool for administrators, health policy analysts, pediatric providers, researchers, insurers and educators. It will allow quick and easy retrieval of most useful material data sources for maternal and child health with special emphasis on health care for chronically ill children.

Head Start Program

Section 640(d) of the Head Start Act (Section 635 et seq. of the Omnibus Budget Reconciliation Act of 1981, P.L. 97-35, (42 U.S.C. section 9835 [d]), reiterates Head Start's 1974 legislation by requiring "that for fiscal year 1982 and thereafter no less than 10 percent of the total number of enrollment opportunities in Head Start programs in each State shall be available for handicapped children, and that services shall be provided to meet their special needs." In addition, the Head Start Act adopts the definition of handicapped children provided in paragraph (1) of section 602 of P.L. 91-230, the Education of the Handicapped Act, as amended, (20 U.S.C. section 1401[1]). That Act defines the term handicapped children as "mentally retarded, hard of hearing, deaf, speech or language impaired, visually handicapped, seriously emotionally disturbed, orthopedically impaired, or other health impaired children or children with specific learning disabilities who by reason thereof require special education and related services." Outside the scope of this definition are children with correctable conditions who do not need special services or who will not require altered or additional educational support services.

Children with handicaps must meet the eligibility requirements for Head Start programs. Eligibility refers to the ages of the participating children (between three years and the age of compulsory school attendance) and family income (at least 90 percent of the children must be from low income families, including families receiving public assistance).

It has been estimated that there are 258,200 handicapped children of preschool age (3-5) in the United States who are eligible for Head Start programs. Although there are various programs available to assist children with handicaps, Head Start continues to make a notable contribution, particularly for those children who can benefit from a comprehensive developmental experience in a mainstream setting which integrates handicapped and nonhandicapped children. The number of children with handicaps enrolled in Head Start has risen steadily since the data were first reported from 22,807 in 1973 to 59,335 handicapped children in 1984. In 49 of the 50 States and the District of Columbia, children professionally diagnosed as handicapped accounted for at least 10 percent of Head Start enrollment.

Head Start has exceeded the 10 percent enrollment level nationally with a 12.5 percent enrollment of handicapped children in program year 1983-1984. Only Alaska, with an 8.8 percent enrollment of handicapped children, fell short of the 10 percent enrollment target.

The enrollment and mainstreaming of handicapped children has become a characteristic feature of local Head Start programs. In 1984, only 24 out of 1,767 Head Start programs served no handicapped children. Head Start continues to be the largest program that includes preschool handicapped children in group experiences with nonhandicapped children on a systematic basis. Head Start policy requires that the handicapped child be placed in a mainstream classroom setting as soon as appropriate.

Handicapped children enrolled in Head Start programs received the full range of child development services required for all children in the Head Start Program Performance Standards as published in 45 CFR Part 1304. These services include education, parent involvement, social services, and health services (medical, dental, nutrition and mental health). In addition, they received the special education and related services required by the Head Start legislation. Some 94.3 percent of the Head Start programs reported special efforts to enroll and serve more severely handicapped children. Programs provided assessment and diagnosis to evaluate accurately the nature and severity of each child's handicap in order to serve the child most effectively.

Additionally, Head Start programs reported a number of special services provided to parents of handicapped children, including counseling; referrals to other agencies; visits to homes, hospitals, etc.; parent conferences with technical staff and other parent meetings; transportation; literature and special teaching equipment; workshops; medical assistance; and special classes.

Head Start and other agencies and organizations concerned with handicapped children coordinate efforts in order to make maximum use of their limited individual resources. Head Start programs reported working with other agencies in several ways:

- 43 percent of the handicapped children were referred to Head Start by other agencies or individuals; 20.7 percent of the handicapped children were referred and professionally diagnosed prior to Head Start.

- 64.5 percent of the children received special education or related services from other agencies.

- 95.8 percent of the programs had written or informal agreements with local education agencies or other agencies regarding services for handicapped children, reflecting a slight decrease over those that so reported in 1983 (97.4 percent).

The March 1984 Current Population Survey conducted by the Bureau of the Census reported that the number of children in poverty in the age group 3-5 is 2,582,000. Based on the estimated prevalence of handicapped children in this age group, it is estimated that 10 percent or 258,200 of these children are handicapped.

The types of handicapping conditions of children professionally diagnosed as having handicaps are presented in Table D4 as a proportion of the total population of handicapped children in Head Start programs in 1984. Of the handicapped children enrolled in Head Start, 61 percent have been diagnosed as speech impaired. This is by far the largest category of handicapped children served in Head Start programs. The State Education Agencies report an even higher proportion of speech impaired children in the preschool age range which they are serving under P.L. 94-142. In addition, Head Start requires that all children be professionally diagnosed. A previously completed study on children with speech impairments has determined that most of the children categorized as speech impaired in Head Start had been appropriately diagnosed. The proportion of speech impaired children served by Head Start is consistent with the proportion of preschool children in the larger population served under P.L. 94-142 by the public schools.

Head Start programs have enrolled children with a wide range of handicapping conditions. In 1984, ninety-six and three-tenths percent of the programs enrolled at least one child who was speech impaired; 67.6 percent of the programs enrolled at least one child whose primary handicapping condition was health impairment; for physical handicap, the proportion was 62.6 percent; mental retardation, 48.3 percent; specific learning disability, 44.5 percent; serious emotional disturbance, 44.1 percent; hearing impairment, 37.6 percent; visual impairment, 34.9 percent; deafness, 6.5 percent; and blindness, 6.5 percent.

There were 36,199 speech impaired children enrolled in Head Start programs. The data on the specific conditions of speech impairment are presented in Table D5.

In 1984, there were 7,178 health impaired children enrolled in Head Start programs. The data on specific conditions of health impairment are presented in Table D6.

In 1984, there were 3,475 physically handicapped children enrolled in Head Start programs. The data on the specific conditions of physically handicapped are presented in Table D7.

There were 3,391 specific learning disabled children enrolled in Head Start programs. The data on the specific conditions of specific learning disabled are presented in Table D8.

TABLE D4

Types of Handicapping Conditions of Children Professionally Diagnosed as Handicapped

Handicapping Condition	Number	Percent of Total Number of Children Professionally Diagnosed as Handicapped
Speech Impairment	36,199	61.0
Health Impairment	7,178	12.1
Physical Handicap (Orthopedic)	3,475	5.9
Specific Learning Disability	3,391	5.7
Mental Retardation	3,053	5.1
Serious Emotional Disturbance	2,746	4.6
Hearing Impairment	1,710	2.9
Visual Impairment	1,297	2.2
Deafness	153	0.3
Blindness	33	0.2
Total	59,335	100.0

TABLE D5

Specific Handicapping Conditions of Children Professionally Diagnosed as Speech Impaired

Specific Conditions	Percent of Total
Expressive or Receptive Language Disorders	51.6
Severe Articulation Difficulties	40.6
Severe Stuttering	2.1
Voice Disorders	1.5
Cleft Palate, Cleft Lip	1.5
Other Speech Disorders	2.7
Total	100.0

TABLE D6

Specific Handicapping Conditions of Children Professionally Diagnosed as Health Impaired

Specific Conditions	Percent of Total
Respiratory Disorders	18.7
Epilepsy/Convulsive Disorders	16.7
Blood Disorders (e.g., Sickle Cell Disease, Hemophilia, Leukemia)	11.2
Severe Allergies	10.1
Heart/Cardiac Disorders	9.1
Neurological Disorders	6.2
Diabetes	1.6
Autism	1.5
Other Health Disorders	24.9
Total	100.0

TABLE D7

Specific Handicapping Conditions of Children Professionally Diagnosed as Physically Handicapped (Orthopedically Handicapped)

Specific Conditions	Percent of Total
Cerebral Palsy	30.5
Congenital Anomalies	16.0
Deformed Limb	10.1
Bone Defect	9.9
Spina Bifida	6.9
Oro/Facial Malformation	3.6
Absence of Limb	2.4
Severe Scoliosis	1.8
Arthritis	1.4
Other	17.4
Total	100.0

TABLE D8

Specific Handicapping Conditions of Children Professionally Diagnosed as Specific Learning Disabled

Specific Conditions	Percent of Total
Motor Handicaps	24.8
Sequencing and Memory	20.3
Perceptual Handicap	19.7
Hyperkinetic Behavior	12.9
Minimal Brain Dysfunction	7.0
Developmental Aphasia	5.2
Dyslexia	0.5
Other	9.6
Total	100.0

Head Start serves a significant proportion of children with severe or multiple handicaps. A child with multiple handicaps is likely to need a variety of treatments and services. Head Start policy requires that the individual plan of action for special education, treatment, and related services be based on the child's specific handicapping condition(s) and the unique needs arising from those conditions. Head Start staff, in conjunction with other professionals and the child's family, have to set priorities and objectives, and tailor services for that child in order to provide a focused, systematic plan of action.

In 1984, 10,230 (17.2 percent) of the handicapped children enrolled in Head Start programs had multiple handicapping conditions. Although the proportion is a decrease over the previous year, this is an increase in the number of multihandicapped children reported last year (10,104). The proportion of multihandicapped children declined from 27.7 percent in 1978.

Compared to other handicapping conditions, deaf children (73.2 percent) and mentally retarded children (66.4 percent), show the highest incidence of multihandicaps, and speech impaired children the lowest (6.5 percent). Table D9 provides specific data by primary handicapping condition on the number of children who have multihandicapping conditions as reported in 1984.

TABLE D9

Distribution of Number of Multihandicapped Children by Primary or Most Disabling Handicap

Primary Handicapping Condition	Number of Children Reported	Number of Children With One or More Other Handicapping Conditions	Percent of Children Who Have One or More Other Conditions
Deafness	153	112	73.2
Mental Retardation	3,053	2,026	66.4
Blindness	133	61	45.9
Hearing Impairment	1,710	692	40.5
Specific Learning Disability	3,391	1,354	39.9
Physical Handicap	3,475	1,221	35.1
Serious Emotional Disturbance	2,746	751	27.3
Visual Impairment	1,297	300	23.1
Health Impairment	7,178	1,367	19.0
Speech Impairment	36,199	2,346	6.5
Total	59,335	10,230	17.2

Administration on Developmental Disabilities

The Administration on Developmental Disabilities supports services which promote self-sufficiency and protect the rights of developmentally disabled persons of all ages. Developmental Disabilities are defined as severe, chronic disabilities attributable to mental or physical impairments which are manifested before age 22; are likely to continue indefinitely; result in substantial limitations in three or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living and economic self-sufficiency; and result in the need for services over an extended period of time.

The Developmental Disabilities program is committed to expanding the life opportunities for the approximately 3.9 million citizens with developmental disabilities in this nation. To accomplish this goal, four grant programs are authorized by the Developmental Disabilities Assistance and Bill of Rights Act. They are:

- The Basic State Grant Program which includes grants to States based on a formula specified in the legislation. The funds are to provide broad planning and service activities for particular needs in a State.

- The Protection and Advocacy Program which provides for the protection and advocacy of individual rights through categorical grants awarded to States on the basis of a formula specified in the legislation.

- The University Affiliated Facilities Program (UAF) grants which provide a national network of programs for interdisciplinary training, exemplary services, technical assistance, and dissemination of information. UAF funds serve as the catalyst to generate additional private and public funds in support of research and development on behalf of improving services and technology to developmentally disabled people.

- The Special Projects Grants Program which provides discretionary grants for research and demonstration of new approaches to service delivery.

This year's Employment Initiative, as part of the President's Initiative to increase employment of handicapped individuals, was highlighted by the expansion and extension of job placements, and pledges. The placements were accomplished through trade associations, employer groups and individual corporations. The 1985 job pledges and placements totaled 59,357 and 57,995 respectively, exceeding the goals of 50,000 each.

States provided a variety of services to developmentally disabled persons under the Basic State Grant program in the Federal priority areas of alternative community living arrangements, case management, child development services and employment. Such services include systemic change, advocacy and guardian services, demonstration grants to test new service delivery models, and direct services to reach rural or otherwise difficult to serve clients (e.g. minorities, those with dual diagnosis; and the developmentally disabled juvenile offender). In Fiscal year 1985, 35 of the 56 States or jurisdictions which participated in the Basic State Grant program used Federal funding to provide direct services to 55,657 persons with developmental disabilities.

Protection and advocacy systems in every State provided direct advocacy services to over 52,000 clients during 1985.

The University Affiliated Facilities provided interdisciplinary training to professionals in the developmental disabilities field. In addition, the facilities provided evaluative, diagnostic, and other services to children and families, and also provided technical assistance and information on exemplary service techniques, training and research to local, State, National and International audiences.

The Administration on Developmental Disabilities' Fiscal Year 1985 State Funding Summary arrays composite funding data for the four program components.

Public Law 94-103 expanded the target population to include individuals with autism. This action enlarged the scope of the definition while retaining the clause regarding onset of the condition, expected duration, and the ability to function in society.

In 1978, the Developmental Disabilities Assistance and Bill of Rights Act (P.L. 95-602) was enacted with a new functional definition of developmental disability. The definition established in this law is the current operating definition. Public Law 95-602 defines developmental disabilities as "severe, chronic disabilities attributable to mental or physical impairment which are manifested before age 22; are likely to continue indefinitely; result in substantial limitations in three or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and economic self-sufficiency; and result in the need for services over an extended period "42 U.S.C. 6001(7), P.L. 98-527, section 102(7).

The new definition, by the elimination of all categorical references, not only reinforced the commonality of service needs but also highlighted the importance of varying combinations and sequences of services over time. The definition also sets the stage for addressing how best to serve the developmentally disabled citizen by identifying those existing and potential strengths an individual could rely upon to participate more fully in the social and economic aspects of community life.

The 1978 amendments also introduced the concept of priority services to assist States in focusing their resources on (1) specific areas that needed improvement, and (2) the development of greater consumer representation on the State Planning Councils.

The Omnibus Budget Reconciliation Act of 1981 (Public Law 97-35), extended the Developmental Disabilities Program through Fiscal Year 1984 and provided an appropriation of $62.4 million. The current legislation, the Developmental Disabilities Assistance and Bill of Rights Act, was amended and extended most recently by the Developmental Disabilities Act of 1984, Public Law 98-527.

The changes made by this Act represent significant changes from all previous authorizing legislation.

The overall mission of the Developmental Disabilities Assistance and Bill of Rights Act, as amended by the Developmental Disabilities Act of 1984, focuses on the ability of an individual with developmental disabilities to reach his or her maximum potential through realistic goals of increased independence, productivity, and community integration. These goals are the basis for the Employment Initiative. The new legislation recognizes the importance of employment as a means to achieving these goals. A new priority service area, employment-related activities, has been added to the Act, and is defined as follows:

> "Employment related activities means such services as will increase the independence, productivity, or integration of a person with developmental disabilities in work settings, including such services as employment preparation and vocational training leading to supported employment, incentive programs for employers who hire persons with developmental disabilities, services to assist transition form special education to employment, and services to assist transition from sheltered work settings to supported employment settings or competitive employment."

For any fiscal year after 1986 for which the total appropriations for the Basic State Grant program equals or exceeds $50,250,000, the State Plan must include employment related activities as a priority service. Many States have already amended their State Pans to incorporate this significant new focus.

ADD/HDS discretionary funding was combined with funding from the Department of Education/Office of Special Education and Rehabilitative Services for Supported Employment Demonstration Projects under which ten States were awarded grants for five years to develop Statewide networks of supported employment for persons with severe disabilities. The programs to be developed are expected to serve as a referral resource for non-supported competitive employment placement.

This effort for persons with severe disabilities, who might not otherwise have access to the competitive labor market, should provide excellent opportunities for competitive placements.

ADD provided technical assistance to State Developmental Disabilities Councils to bring about systemic changes at the State government level. A grant to the Council of State Planning Agencies (CSPA) provides support for a series of training seminars in which Developmental Disabilities Council staff will be teamed with key State agency staff to address strategies for achieving State policy change in programs affecting employment of persons with developmental disabilities. Arkansas, Colorado, Connecticut, Florida, Minnesota, New Hampshire, New Jersey, and North Dakota will participate in the training academies.

The Developmental Disabilities Basic Support Program assists States in developing and implementing a comprehensive plan for meeting the needs of developmentally disabled persons. Program emphasis is on ensuring that persons with developmental disabilities have the range of services available to them which best promotes self-sufficiency.

The basic goal of the program is to provide for significant improvement in the quality, scope, and extent of services for persons with developmental disabilities by means of;

- providing priority services which include alternative community living arrangement services, employment related activities, child development services, and case management services;

- providing specialized services and other adaptations of generic services for persons with developmental disabilities; and,

- planning, coordination, administration, and advocacy for the provision of services to persons with developmental disabilities. This includes a Statewide plan for the provision of services to developmentally disabled persons using the resources of many other State and local programs.

Grants are authorized by Section 121 of the Act to strengthen existing services by providing financial assistance to designated State agencies and State Planning Councils. Funds are allocated to support planning, administrative costs, and delivery of services. Developmental Disabilities Basic Support and Protection and Advocacy funds are allocated for each year on the basis of: "(A) the population, (B) the extent of need for services for persons with developmental disabilities, and (C) the financial need of the respective States."

The grant formula uses population figures based on the total population and the working population (ages 18-64) of each State; data are based on the most current year available from the Bureau of the Census, U.S. Department of Commerce. The number of beneficiaries in each State under the Child's Insurance Benefits Program is used in determining the extent of need for services for persons with developmental disabilities The data used are from the most current year available from the Social Security Administration, U.S. Department of Health and Human Services.

State per capital income is computed against National per capita income in determining financial need; data used are an average of the three most current years available from the Bureau of Economic Analysis, U.S. Department of Commerce.

As established by P.L. 98-57 and effective in FY 1985, the minimum allotment for the Basic State Grant Program to each State, the District of Columbia, and Puerto Rico, in any fiscal year where the appropriation exceeds $47,000,000 is $300,000 or the amount of the allotment received by the State for the fiscal year ending September 30, 1984, whichever is greater. For the Virgin Islands, American Samoa, the Commonwealth of the Northern Mariana Islands, Guam, and the Trust Territory of the Pacific Islands, the allotment in any fiscal year where the appropriation exceeds $47,000,000 shall not be less than $160,000.

Grants are awarded to States in accordance with approved State Plans for services for persons with developmental disabilities. The Federal share of projects funded through these formula grants may not exceed 75 percent of the aggregate of such, except for projects which serve urban or rural poverty areas. In these cases, the Federal share may not exceed 90 percent. The funding level for this program in Fiscal Year 1985 was $50.25 million.

Priority Services. The Act requires that States spend at least 65 percent of their State grant for service activities within the priority services. In FY 1985, States were required to select at least one, but not more than two, priority services. Table D10 indicates the priority services selected by each State. The term "service activities" includes not only the provision of direct services to persons with developmental disabilities, but also activities to increase the capacity of agencies to provide such services. These various services include the coordination of the provision of services, outreach to individuals and training of personnel, including parents of persons with developmental disabilities.

Each State has a great deal of discretion and flexibility in determining what types of activities to be conducted under the State Plan are most appropriate for that State. While a number of States provide direct services to persons with developmental disabilities, other States concentrate exclusively on service activities which they anticipate will result in systemic change in the State and thus impact upon the entire developmentally disabled population. State reports indicate that direct services were provided to 44,210 persons in FY 1985. Services were primarily in the area of habilitation, job training, health care and education, all of which support independence, productivity and integration in the community.

Table D10
PRIORITY SERVICE AREAS

TOTALS	ALTERNATE COMMUNITY LIVING ARRANGEMENT	CHILD DEVELOPMENT	CASE MANAGEMENT	EMPLOYMENT	NON-VOCATIONAL* SOCIAL DEVELOPMEN SERVICE
Alabama	X	X			X
Alaska	X	X			
Arizona			X		
Arkansas		X			X
California	X			X	
Colorado			X		
Connecticut					
Delaware	X				
District of Columbia		X	X		
Florida		X	X		
Georgia			X		
Hawaii	X			X	
Idaho	X	X			
Illinois	X	X			
Indiana	X		X		
Iowa	X		X		
Kansas		X		X	
Kentucky		X	X		
Louisiana	X	X			
Maine	X	X			
Maryland	X	X			
Massachusetts		X			X
Michigan		X		X	
Minnesota					X
Mississippi	X	X	X	X	
Missouri					X
Montana	X	X			
Nebraska		X		X	
Nevada	X				X
New Hampshire	X	X			
New Jersey	X		X		
New Mexico	X	X			
New York		X			X
North Carolina	X	X			
North Dakota		X			X
Ohio	X	X			
Oklahoma					X
Oregon			X		
Pennsylvania	X	X			
Rhode Island			X		X
South Carolina			X		
South Dakota			X		X
Tennessee		X		X	
Texas	X				X
Utah	X	X			
Vermont	X			X	
Virginia	X	X			
Washington			X		X
West Virginia		X	X		
Wisconsin	X	X			
Wyoming	X	X			
American Samoa		X	X		
Guam				X	
Puerto Rico	X	X			
Virgin Island	X	X			
Northern Mariana Islands			X		X

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*Non-Vocational Social Development Services was a priority service for part of FY 1985

A Description of Early Childhood State Grants: Planning, Development, and Implementation

ALABAMA

GRANT DIRECTOR:	Freda Judge Program for Exceptional Children and Youth Department of Education State Office Building, 8th Floor 501 Dexter Avenue Montgomery, AL 36130
TELEPHONE:	205/261-5099

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

Agencies that serve preschoolers including the handicapped have been identified and persons to serve on a planning phase advisory panel were selected to plan a Statewide needs assessment. The logistics of tracking handicapped preschoolers and of administering Department of Education activities related to preschool handicapped children have been investigated.

INTERAGENCY ACTIVITIES:

The Alabama Department of Education has working relationships with the Departments of Public Health, Mental Health, and Pensions and Security, the State agencies responsible for the major programs currently available to handicapped preschoolers. Alabama will investigate the logistics of more formal interagency commitments during the project year. An HCEEP planning-phase advisory panel representing professional, support, and lay persons will review initial data summaries and make recommendations regarding a formal Statewide needs assessment.

ALASKA

GRANT DIRECTOR:
Colleen Powers, Coordinator, SPG Director
Christine Niemi, Director
Department of Eduction
Office of Special Services
Pouch F - State Office Building
Juneau, AK 99811

TELEPHONE: 907/465-2970

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

A Needs "Assessment" Instrument was developed by the Governor's Council. Agencies surveyed were the Infant Learning Programs, Head Start programs, School Districts, Public Health Nursing, Pediatricians, Residential Facilities, and parents.

INTERAGENCY ACTIVITIES:

There are some interagency agreements in place, and Alaska will identify remaining needs for interagency agreements. Alaska has included a master plan for the next five years with goals and objectives established by the project's Interagency Planning Group (IPG).

ARIZONA

GRANT DIRECTOR:
Sara Robertson, Coordinator
Arizona Department of Education
Special Education Section
1535 West Jefferson
Phoenix, AZ 85007

TELEPHONE: 602/255-3183

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

Arizona is completing a needs assessment study, with an increased focus on child identification. During this past year, the State passed a bill appropriating one million dollars for preschool handicapped programs.

INTERAGENCY ACTIVITIES:

Collaboration of four agencies is in progress, and an interagency agreement for services for the 0-2 handicapped population will be developed in this second planning year. A fall conference to address program/curriculum needs is planned in conjunction with Head Start.

ARKANSAS

GRANT DIRECTOR:

Mary Kay Curry
Arkansas Department of Education
Special Education Division
#4 Capitol Mall/Room 105C
Little Rock, AR 72201

TELEPHONE: 501/371-1686

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

Over the past year, Arkansas has determined the number of children and their disabilities who need services, developed components needed in a comprehensive service delivery system and developed and provided parent support services.

INTERAGENCY ACTIVITIES:

Efforts to develop interagency collaboration continue.

CALIFORNIA

GRANT DIRECTOR:

Betsy Qualls, Coordinator
Nancy Obley-Kilborn, Director
California State Department of Education
Special Education Division
721 Capitol Mall
Sacramento, CA 95814

TELEPHONE: 916/323-4762

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

In 1985, five million dollars came from the Governor's budget to expand infant services. Funds are now up to $13 million. New funding mechanisms and procedures were implemented, including a requirement for local plans for early intervention services. This provided staff with information on current local needs assessment and on local interagency planning and implementation. Staff have a completed needs assessment of early intervention services which will be included in a written state-of-the-art report.

INTERAGENCY ACTIVITIES:

Collaboration exists between major State organizations and planning groups through the activities of the Child Development Programs Committee, California First Chance Consortium, and several task forces. Coordination is planned with related grants, an intradepartmental early education task force, and groups outside the State.

COLORADO

GRANT DIRECTOR: Elizabeth W. Soper
Colorado Department of Education
Special Education Services Unit
303 West Colfax Avenue, 6th Floor
Denver, CO 80204

TELEPHONE: 303/573-3267

DEVELOPMENT GRANT

ACCOMPLISHMENTS:

During the past year, a process was developed to establish needed services with parental input and to assure continuing assessment and diagnosis. A system for identifying and providing appropriate personnel preparation and training was created. An effort was also made to determine what aspects of a comprehensive system of services are in place and which alternative services are needed. Finally, information was disseminated through the State on available services and planning efforts.

INTERAGENCY ACTIVITIES:

The State initiated a coordinated interagency planning process with all responsible State agencies to develop and implement a comprehensive system of early intervention services, including services needed during the prenatal period.

Interagency focus was coordinated through a State steering committee. Special emphasis was placed on coordination with other Federal special education grants and with State regional assistance teams working at the local level.

CONNECTICUT

GRANT DIRECTOR:	Virginia Volk, Director Bureau of School and Program Development Room 350 State Department of Education P.O. Box 2219 Hartford, CT 06145
TELEPHONE:	203/566-1961

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

Connecticut is completing a study of the needs for children, ages 0-5. Additionally, they are participating in a research study of the implications of delivering services to the 0-3 populations and preparing a plan for a mandate from birth that will provide information needed by the State legislature. They are also developing a training program for professionals and families as well as a public information program.

INTERAGENCY ACTIVITIES:

An Interagency Committee has been established to coordinate services to handicapped infants and toddlers.

DELAWARE

GRANT DIRECTOR:
Barbara Humphreys
State Department of Public Instruction
Townsend Building
P.O. Box 1402
Dover, DE 19903

TELEPHONE: 302/736-4667

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

A State Plan Council Committee has been established and is in the process of analyzing data obtained from the needs assessment and compiling information regarding service providers. The Statewide tracking system is being refined. The development of a procedural plan for comprehensive early childhood services is currently in outline form and being completed. Planning Committee, with the participation of public and private agencies, is working on developing a consensus on issues to be confronted and prioritization of the issues.

Awareness programs are being implemented, training developed for families, and professional linkages are being established with other agencies and organizations throughout the country. Federal evaluations of the Planning phase are being conducted, and the results are being used to develop the strategy where indicated.

INTERAGENCY ACTIVITIES:

University of Delaware staff are members of the Planning Committee and task forces, and increasingly in evaluation activities. State Social Services agencies also serve on Planning Committee and task fores. These include Public Health, Mental Rehabilitation, and Social Service Divisions. Parent advocacy groups are represented on the Planning Committee and Management Board.

DISTRICT OF COLUMBIA

GRANT DIRECTOR: Maurine Thomas
Jackie Jackson
Division of Special Education and
Pupil Personnel Services
10th and H Streets, N.W.
Washington, D.C. 20001

TELEPHONE: 202/724-4018

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

Over the past year, D.C. has identified interagency commitments for coordinated services to handicapped children birth to age 3 years and their families; determined the number of handicapped children birth to age 3 years, their needs, and available services; planned for the development of procedures and designed an early childhood State plan; and planned training activities for families, caretakers, and professionals working with handicapped children birth to age 3 years.

INTERAGENCY ACTIVITIES:

Interagency commitments will be sought from hospital pediatric and child development clinics, programs serving children birth to age 3 years, Head Start, Department of Human Services, Department of Recreation, Visiting Nurses Association, HCEEP projects, and the Spanish Educational Development Center. Representatives of parent groups and agencies serving handicapped children will form working committees to investigate interagency coordination and various components of the early childhood State plan.

FLORIDA

GRANT DIRECTOR:
Pat Hollis
Bureau of Education for Exceptional Students
Florida Department of Education
204 Knott Building
Tallahassee, FL 32301

TELEPHONE: 904/488-5582

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

The Comprehensive State Plan has been used to ensure access by all preschool children to education and related services, and services were improved and expanded with an emphasis on identification, parental involvement, public awareness, dissemination of interagency products, and availability of facilities and transportation. Services were coordinated with various State agencies to ensure local services without duplication or gaps; family, child identification, and interagency model site components for the Comprehensive Plan were developed; and financial resources were identified.

INTERAGENCY ACTIVITIES:

The major advisory group will be the State Steering Committee for PreKindergarten Exceptional Programs. Assistance will be provided by related State steering committees, policy groups, councils, task forces, State universities, the Head Start Support Center, and YES, Inc. Collaborative efforts will be established with other Federal grant activities in special education and health and rehabilitation.

GEORGIA

GRANT DIRECTOR:
Rae Ann Redmon
Program for Exceptional Children
Office of Instructional Services
Twin Towers East
Atlanta, GA 30334

TELEPHONE: 404/656-2426

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

Long-range planning efforts for comprehensive interagency service delivery and management systems for infants and preschoolers have been designed; current and overlapping services in public and private agencies and future needs were identified; collaboration at State, regional, and local levels was effected; a student information system was created; training for families and caretakers who provide services was established; and financial and other resources were identified.

INTERAGENCY ACTIVITIES:

Cooperative efforts were planned with other Federal special education grant activities, including preschool incentives, P.L. 94-142, flow-through funded projects, and P.L. 89-313 programs. Linkages were strengthened with the migrant education program, Department of Human Resources, Head Start, State colleges, Section 72 Committee, Special Education Advisory Panel, Psychoeducational Program Network, and the Governor's Office of Planning and Budget.

HAWAII

GRANT DIRECTOR:
Jo-Alyce Peterson, Director
Sue Brown, Coordinator
Hawaii Department of Education
Office of Instructional Services
Exceptional Children's Section
3430 Leahi Avenue
Honolulu, HI 96815

TELEPHONE: 808/737-2564

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

Three questionnaires have been developed:

1. Agency
    - for child find activities
    - general directory information
    - client profile
    - services delivered
    - personnel-training-funding sources
2. Parent
    - for needs of parents with handicapped children aged 0-5.
3. Personnel
    - to determine training needs

Proposed activities include the completion of a needs assessment as the highest priority.

INTERAGENCY ACTIVITIES:

Ongoing State agency coordination will involve the Departments of Education, Health, Social Services, and Housing, along with the University of Hawaii. Resource Access Project of the Pacific will be active in preplanning activities with these agencies and with the university.

IDAHO

GRANT DIRECTOR: Katherine Pavesic
Idaho Department of Health and Welfare
Division of Community Rehabilitation
450 West State Street
Boise, ID 83720

TELEPHONE: 208/334-4181

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

1. Needs assessment included information about:
    - screening of handicapped children
    - transition process between service providers
    - referral process
    - availability and accessibility of child care
    - limited training opportunities
    - parental involvement

2. Statewide forums held to create a strong base of information. These were understaffed in all 7 regions.

3. Establishment of Advisory Panel.

4. Development of Idaho Consortium for Administration, Resources, Education, and Support for early intervention (CARES).

INTERAGENCY ACTIVITIES:

The Idaho Department of Health and Welfare has an interagency agreement with the Idaho Department of Education to provide services to handicapped preschoolers. An advisory panel will meet quarterly to help develop a system to coordinate State plan grant activities. The panel will include a parent, teachers, early childhood professionals, and legislators.

ILLINOIS

GRANT DIRECTOR: Jonah Deppe
Illinois State Board of Education
Department of Specialized Education Services
100 North First Street
Springfield, IL 62777

TELEPHONE: 217/782-4321

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

Planning for a comprehensive early childhood State plan has been completed; the history and authority of each public State agency providing services to children birth to age 5 years was summarized; discrepancies between needs and available services was determined; needs assessment data was compiled, interpreted, and disseminated; and awareness of project activities was promoted.

INTERAGENCY ACTIVITIES:

Three interagency groups were formed during the project: (1) an Interagency Council (steering committee) of administrators from State agencies involved in services to handicapped children birth to age 5 years and a liaison from the governor's office; (2) an advisory council of representatives from service providers, professional groups, and parent organizations; and (3) a task force of staff members from State agencies serving handicapped children birth to age 5 years.

INDIANA

GRANT DIRECTOR: Sara B. Clapp
Indiana Department of Education
Division of Special Education
Room 229, State House
Indianapolis, IN 46204

TELEPHONE: 317/927-0216

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

A comprehensive Statewide needs assessment has been conducted, task forces that will address issues related to a comprehensive service delivery system for handicapped children birth to age 5 years have been developed, and Statewide awareness of services for young handicapped children in Indiana was increased.

INTERAGENCY ACTIVITIES:

Representatives from parent groups, higher education, the Mental Health Department, local education agencies, and the major State and local service providers to young handicapped children and their families form Indiana's 25-member Task Force on Early Childhood Special Education, which serves as the steering committee for the grant.

IOWA

GRANT DIRECTOR:	Joan Clary Iowa Department of Public Instruction Division of Special Education Grimes State Office Building Des Moines, IA 50319
TELEPHONE:	515/281-3176

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

Agencies, parents, and other groups as part of the State Plan Advisory Council for Early Systems have been brought together; accurate, comprehensive data about current services from agencies, institutions, and parents was gathered; an evaluation assessment to determine the status and needs of comprehensive service delivery systems for the target population was constructed and conducted; and research on the education of severely handicapped and preschool children who need to be integrated with nonhandicapped peers was conducted, as was an Outreach Fair to increase public awareness on available service models. Incentive grants to education agencies that want to replicate early intervention projects were awarded.

INTERAGENCY ACTIVITIES:

Emphasis is placed on maximizing programs and services for all eligible students Statewide by integrating funding from all sources and evaluating the effectiveness of this integration.

KANSAS

GRANT DIRECTOR: Betty Weithers
Kansas State Department of Education
Special Education Administration
120 Tenth Street
Topeka, KS 66612

TELEPHONE: 913/296-3869

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

Development of the State plan continues, parents were trained for effective involvement in the development of a comprehensive service delivery system, a Statewide system of parent leaders was developed, public awareness of the need for early intervention was increased, and development of the computerized service information system continues.

INTERAGENCY ACTIVITIES:

A Governor's Cabinet Subcommittee on Early Childhood Developmental Services has been established to ensure a formal system of interagency coordination. In addition, an advisory committee of parents of handicapped children and local service providers has been appointed to advise the cabinet subcommittee and the State plan grant staff.

KENTUCKY

GRANT DIRECTOR: Betty Bright
Office of Education for Exceptional Children
Capital Plaza Tower
Frankfort, KY 40601

TELEPHONE: 502/564-2067

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

The status of services were assessed; components were identified; and a procedure and design for the development of an early childhood State plan, a comprehensive service delivery system, and a set of accepted (nonregulatory) standards were established. Public awareness was increased.

INTERAGENCY ACTIVITIES:

Parents and professionals serve on an advisory board that contributes to and reviews project plans, reports, and activities. At least four sites have been selected to pilot interagency strategies.

LOUISIANA

GRANT DIRECTOR:
Ron LaCoste
Preschool Handicapped Program
Louisiana Department of Education
P.O. Box 94064
Baton Rouge, LA 70804-9064

TELEPHONE: 504/342-3631

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

A Statewide assessment that prioritized service delivery needs of public and private providers, parents, and others was conducted; State goals for the Louisiana Early Childhood Program that were approved by a State agency steering committee were written; and existing or needed information on the status of each of these State goals was assembled and analyzed. A prioritized listing of needs required to establish a comprehensive service delivery system was created; a Statewide interagency steering committee was organized; and regional planning councils that will help with needs assessment, comprehensive planning, and information dissemination were formed.

INTERAGENCY ACTIVITIES:

State-level coordination was effected with the Office of Personal and Preventative Health Services, Handicapped Children's Services, Maternal and Child Health, LA Association for Retarded Citizens, Head Start, parents, and Offices of Mental Retardation and Developmental Disabilities.

MAINE

GRANT DIRECTOR: Susan Mackey-Andrews, Director
Department of Education and Cultural Services
State House Station #23
Augusta, ME 04333

TELEPHONE: 207/289-5971

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

Among the major activities was the implementation of a coordination system at State and local levels, which includes the development of management systems; increased parent participation; ongoing needs assessment, program evaluation, and outreach and awareness activities; developing and field testing of program standards, policies, guidelines, and regulations; and interagency agreements at the State level. They are intensively studying the implications and benefits of an interdepartmental mandate for handicapped children 0-5.

They have developed and installed a computerized case management data system on a Statewide basis, which interfaces with and complements the State plan needs assessment.

INTERAGENCY ACTIVITIES:

The Interdepartmental Coordinating Committee for Preschool Handicapped Children, which is directing the planning grant, represents the departments of Educational and Cultural Services, Human Services, and Mental Health and Mental Retardation.

MARYLAND

GRANT DIRECTOR: Janeen Taylor
Division of Special Education
200 W. Baltimore Street
Baltimore, MD 21201

TELEPHONE: 301/659-2498

DEVELOPMENT GRANT

ACCOMPLISHMENTS:

Interagency collaboration was established through an Advisory Council, Steering Committee, and professional and parent advisory networks; programs were improved by focusing on health and education issues, reviewing legislation, identifying exemplary interagency service models for the medically fragile and emotionally disturbed, and working with other State departments to develop policies on managing communicable diseases. Interagency collaboration was promoted at all levels by evaluating models for local consortia that involve parents; training materials related to parenting were developed and expanded; and the competencies of administrators and service providers were improved through technical assistance, identifying transition models, encouraging adoption of outreach model components, and exploring appropriate technology.

INTERAGENCY ACTIVITIES:

Project activities have been coordinated with P.L. 94-142 Preschool Incentive Grant projects. Ongoing collaborative efforts were established among two universities; 24 school systems; Departments of Human Services, Health, and Mental Hygiene; and public and private programs and associations.

MASSACHUSETTS

GRANT DIRECTOR: Irma Napoleon, Coordinator
State Plan Grant
Northeast Regional Center
Department of Education
219 North Street
North Reading, MA 01864

TELEPHONE: 617/727-0600

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

The preliminary planning process is completed, and needs have been prioritized. Principles and guidelines have been established and will serve as a basis for evaluating services. Major findings indicate that although services are in place, coordination, transition mechanisms, and general knowledge about availability of services is lacking.

INTERAGENCY ACTIVITIES:

Representatives tour public and private service agencies, and parent groups and advocacy groups oversee and review project activities. Regional planning groups are directing regional needs assessments.

MICHIGAN

GRANT DIRECTOR:
Marvin McKinney
Jan Baxter
Michigan Department of Education
Instructional Specialist Program
P.O. Box 30008
Lansing, MI 48909

TELEPHONE: 517/373-2589

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

Legislation and the current status of State services for children birth to age 5 years were evaluated, interagency collaboration and communication were increased and a comprehensive plan for service delivery was devised, and duplications and gaps in current services were identified. A formal memorandum of agreement from the Human Services Cabinet supporting increased interagency collaboration was obtained, and the Interagency Task Force prepared service data and a management plan. Teacher competencies, evaluation standards for teacher training programs, peer review procedures, techniques for curriculum improvement in personnel development programs, and action plans for training program improvement were recommended. Current needs and problems among direct services personnel and alternatives for professional development were identified.

INTERAGENCY ACTIVITIES:

Coordination activities are organized within the Human Services Cabinet. Participants include officials from the Departments of Public Health, Social Services, and Mental Health. Linkages also have been planned with local service providers, including Head Start, the Perinatal Association, and Infant Mental Health Association.

MINNESOTA

GRANT DIRECTOR: Anita Neumann
Minnesota Department of Education
Special Education Section
550 Cedar Street
St. Paul, MN 55101

TELEPHONE: 612/296-1793

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

The development of coordinated interagency systems was promoted, resources to help regional and local communities plan coordinated service systems were provided, issues were clarified, problems defined, and alternatives proposed related to screening, diagnosis, assessment, and service delivery systems. A comprehensive needs assessment was conducted, at least three information systems for tracking and follow-up that meet identified criteria for State and local implementation were identified, and financial resources and funding options that support State and local interagency collaborations were identified.

INTERAGENCY ACTIVITIES:

The Minnesota Departments of Education, Health, and Public Welfare have joined forces to promote State-level planning. A steering committee of representatives of public and private service providers and consumer and advocacy groups studied issues and made recommendations.

MISSISSIPPI

GRANT DIRECTOR:
Gerri Ruffin
Mississippi State Department of Education
P.O. Box 771
Jackson, MS 39205

TELEPHONE: 601/354-3490

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

A State-level interagency council continues to identify services and to develop a model to determine State needs, and a local interagency council continues to develop, pilot, implement, and evaluate a model for local interagency planning. Four established work groups collect and analyze information and materials for use in planning the State plan grant. Public awareness was promoted and information disseminated.

INTERAGENCY ACTIVITIES:

Two interagency councils have been established, one at the State level and one at the local level. The membership of these councils includes State and local service agencies and organizations, hospitals, university and university-affiliated programs, and parents. The State-level council continues to create a knowledge base and to formulate plans for developing a comprehensive service delivery system.

MISSOURI

GRANT DIRECTOR:

John Allan, State Director of Special Education
Karen Campbell, Coordinator
Missouri Department of Elementary
and Secondary Education
Division of Special Education
P.O. Box 480
Jefferson City, MO 65102

TELEPHONE:

314/751-3502
314/751-2965

ACCOMPLISHMENTS:

A comprehensive needs assessment has been developed and will be conducted by a subgrantee and will address interagency efforts; systems for service administration; standards, regulations, and policies affecting comprehensive service delivery; State and local training efforts for families and professionals; financial resources; and State awareness activities. A final needs assessment report will be developed.

Major goals and objectives established by the State include:

- Establishing a 12-member interagency advisory council to advise the project coordinator regarding grant activities.
- Completing a comprehensive needs assessment.

INTERAGENCY ACTIVITIES:

The Missouri Departments of Elementary and Secondary Education, Mental Health, and Social Services will each name two representatives to serve on the State plan grant's advisory council. Also on the council will be six representatives from private agencies, parents, and higher education.

MONTANA

GRANT DIRECTOR:
Roger Bauer, SPG Coordinator
Judith A. Johnson
Montana Center for Handicapped Children
Eastern Montana College
1500 North 30th Street
Billings, MT 59101-0298

TELEPHONE: 406/657-3993

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

Needs Assessment is in progress. Reports will be prepared on current practices and service delivery needs. Tracking and follow-up systems will be coordinated with training for public and private service providers, parents, and families. Workshops, a monthly newsletter, materials exchange, and training modules are also planned.

INTERAGENCY ACTIVITIES:

Collaboration activities relative to early childhood handicapped services and intervention procedures have been planned with the Office of Public Instruction, Social and Rehabilitation Services Department, Developmental Disabilities, Department of Health and Environmental Sciences, Office of Handicapped Children's Programs, Indian Health Services, and Indian Head Start.

NEBRASKA

GRANT DIRECTOR: Jan Thelen
Nebraska Department of Education
Special Education Branch
P.O. Box 94987
Lincoln, NE 68509

TELEPHONE: 402/471-2471

IMPLEMENTATION GRANT

ACCOMPLISHMENTS:

Various child tracking system activities designed to: (1) achieve consensus on child tracking data items, (2) design and implement a prototype system, and (3) train school district personnel on how to collect and report data were conducted, as were efficacy study activities that include: (1) continuing technical assistance with design, implementation, and computerization at three selected LEA sites; and (2) assisting sites with data analysis, reporting, and interpretation.

INTERAGENCY ACTIVITIES:

A special ad hoc committee of the Nebraska State Special Education Advisory Council (representing school districts, educational service units, multidistrict cooperatives, preschool planning regions, teacher training institutions, the University of Nebraska Medical Center, and the Nebraska Department of Education) oversees and guides all project activities.

NEVADA

GRANT DIRECTOR:	Marilyn Walter Division of Mental Hygiene and Mental Retardation 480 Galletti Sparks, NV 89431	Sharon Palmer Nevada Department of Education Special Education Branch 400 West King Street Capital Complex Carson City, NV 89710
TELEPHONE:	702/789-0284	702/885-3140

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

1. The Nevada Department of Education, in cooperation with the Nevada Department of Human Resources, completed a needs assessment.
2. Both departments provide special education services to eligible handicapped children birth to age six years.
3. An Interagency Task Force membership includes state and local-level representatives, representatives from urban and rural areas, parents, and professionals from universities and from Departments of Education, Health, Mental Hygiene, and Mental Retardation and Rehabilitation.

INTERAGENCY ACTIVITIES:

Nevada is in the process of developing an interagency committee. Full interagency coordination of information and services for the population of exceptional individuals from birth through the age of 21 remains to be developed.

NEW HAMPSHIRE

GRANT DIRECTOR;

Luzanne Pierce, Co-Director
State Department of Education
and Vocational Rehabilitation
Special Education Section
101 Pleasant Street
Concord, NH 03301

TELEPHONE; 603/271-3471

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

1. The State is in the process of implementing a comprehensive interagency needs assessment.
2. A report is being developed involving the status of prevention of handicaps, child find, screening, evaluation, intervention, family support, policy and procedures, monitoring and evaluation, personnel development, resource utilization, networking and awareness activities.
3. The results of the needs assessment will be used as the basis for designing the State plans. The Child Find/Special Education system is being assessed. Training programs are being developed, as well as technical assistance resource teams, a Statewide residential network, and a coalition of programs serving the 0-3 handicapped children.

INTERAGENCY ACTIVITIES:

There is collaboration with the Early Intervention Network, a Statewide coalition of programs serving children birth to age 3 years. In addition, the interagency Early Childhood Special Education Advisory Committee, parents, and consultants participate in collaborative efforts.

NEW JERSEY

GRANT DIRECTOR: Andrea Quigley, Director
State Plan Grant
State Department of Education
225 West State Street, CN 500
Trenton, NJ 08625

TELEPHONE: 609/292-0147

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

Activities have centered around four areas of needs assessment:

1. The continuation of services and the identification of populations underserved or unserved by the current 0-3 and 3-5 service delivery system. A State level committee has been established and task forces selected.
2. Interagency collaboration inservice planning. A planning committee was established. Planning and development of collaborative early intervention programs are continuing. Monitoring guides were developed.
3. The identification of gaps in service, underserved populations, and strengths and weaknesses in service developing and training. Evaluation plan has been developed and pilot sites selected.
4. The identification of inservice and preservice training needs. The State Implementation Grant was used to conduct a forward needs assessment. Team building and transdisciplinary training were identified as major needs. An awareness workshop was considered for adminstration.

INTERAGENCY ACTIVITIES:

Interagency cooperation has been mandated by State law since 1981. The State Departments of Education and Health and Human Services meet weekly to plan and develop early intervention program activities.

NEW MEXICO

GRANT DIRECTOR:
Louis Landry
New Mexico Department of Education
Special Education Unit
State Education Building
Santa Fe, NM 87501-2786

TELEPHONE:
505/827-6541
505/827-2575

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

1. A needs assessment of educational and related services was conducted for children birth to age 5 years.
2. A State plan and a method for ongoing planning and evaluation was designed.
3. Collaborative agreements with State agencies to implement the planning grant were devised.
4. An automated child referral system and a management system were developed.
5. A Statewide print and broadcast public awareness campaign, with an initial emphasis on child find activities, was carried out.
6. Financial resources for implementing the State plan were developed.

INTERAGENCY ACTIVITIES:

The Health and Environment Department, under a joint powers agreement with the State Department of Education, manages the grant and works cooperatively with the Chronically Impaired Children grant program operated out of the Governor's office, the State-funded Developmental Disabilities Planning Council, Parents Reaching Out (PRO), and primary State health providers. Linkages are being developed with Federal Indian programs.

NEW YORK

GRANT DIRECTOR:

Michael Plotzker
Denise Warren
Office of Education of Children
with Handicapping Conditions
State Education Department
Education Building Annex, Room 1061
Albany, NY 12234

TELEPHONE: 518/474-8917

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

Activities in New York are contingent upon whether legislation is enacted during the year. If it is, regulations will be developed, otherwise activities will focus upon developing mandatory legislation. The needs assessment process is ongoing, as well as the development of standards. If there is no change in the delivery system, staff will continue to work to assess the need to modify the review procedures for providing State reimbursement for court-ordered services. Other activities include coordinating training activities for parents and professionals, assisting Early Childhood Centers, expanding referral plans with regional perinatal hospital clinics and infant health assessment programs, promoting awareness of services, and increasing access to services.

INTERAGENCY ACTIVITIES:

Program staff coordinate activities with the State Departments of Health, Social Service, and Developmental Disabilities. Linkages have been made with Federally funded projects, local service providers, the State's training network, the committee on parent education, and other State advising panels.

NORTH CAROLINA

GRANT DIRECTOR: Janis Dellinger
Department of Public Instruction
Education Annex I
217 W. Jones Street
Raleigh, NC 27601

TELEPHONE: 919/733-6081

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

1. Cooperated with the Department of Human Resources, Head Start, and other agencies.
2. Determined collection and other needs, including gaps in service on a county-by-county basis.
3. Developed procedures for designing a full-service delivery plan for children under age 5 years.
4. Developed a competency-based personnel training network to meet state, regional, and local needs through inservice and area workshops, parent awareness sessions, and summer institutes.
5. Developed a comprehensive information system on available services, stressing identification and tracking components.
6. Designed research on the cost effectiveness and long-range (eight to ten years) results of early intervention.

INTERAGENCY ACTIVITIES:

Cooperation was sought with the Department of Human Resources, developmental day centers, Head Start, and private service providers. Linkage also was established with the Council on Children with Special Needs, State Interagency Council on Education and Related Services, and professional groups.

NORTH DAKOTA

GRANT DIRECTOR:	Brenda Oas Department of Public Instruction Division of Special Education State Capitol Bismark, ND 58505-0164
TELEPHONE:	701/224-2277

DEVELOPMENT GRANT

ACCOMPLISHMENTS:

1. Established the Early Childhood Education for Handicapped Infants and Children Advisory Committee.
2. Conducted workshop on assessment and intervention strategies for home services.
3. Conducted inservice for community health nurses in risk "factors" for handicapping conditions.

INTERAGENCY ACTIVITIES:

Grant activities will be implemented under a multiagency agreement among the Department of Health, Human Services, and Public Instruction.

OHIO

GRANT DIRECTOR:

Jane Weichel
Assistant Director
Division for Educational Services
Section for Early Childhood
Ohio Department Building, Room 719
65 South Front Street
Columbus, OH 43366-0308

TELEPHONE: 614/466-9206

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

The needs assessment data has been collected and is in the process of being analyzed. An Interagency Coordinating Council and Steering Committee have been established. Activities have included a stress on Statewide coordination of services, early identification, follow-up, increasing availability of services, the adoption of an interagency model, improving training, and encouraging parent involvement and support.

INTERAGENCY ACTIVITIES:

The plan will be based upon our input from regional meetings. An advisory committee of representatives from parent groups, state agencies, universities, and service providers will help develop and interpret the results of a survey of gaps and overlaps in services.

OKLAHOMA

GRANT DIRECTOR:

Edd Rhoades, Grant Director
Susan Istre, Coordinator
Oklahoma State Department of Health,
Maternal and Child Health Service
P.O. Box 53551
Oklahoma City, OK 73152

TELEPHONE: 405/271-4471

DEVELOPMENT GRANT

ACCOMPLISHMENTS:

A pilot hospital/community transition model of coordinated service provisions for high-risk infants and their families uses models from HCEEP outreach projects WELCOME and OPTIMUS. A family needs assessment, guidelines regarding the criteria for referrals from NICUs and community hospitals, an assessment of the information needs of health-care providers, a continuing education course for nurses, and a directory of early intervention programs will be developed.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To develop a plan for comprehensive early intervention services for handicapped children birth to age 5 years.
- To increase parents' capacities to meet the special needs of their high-risk infant.
- To develop and implement a transition program for high-risk infants which links their family, the neonatal intensive care unit (NICU), the community hospital, and community agencies.
- To inform health care, education, and social service providers about existing services for high-risk infants and their families.

INTERAGENCY ACTIVITIES;

A needs assessment is being conducted by the Oklahoma Commission on Children and Youth. Development activities include services provided by a multidisciplinary team to families of infants in NICU. Intervention which begins in the NICU is later coordinated with community resources.

OREGON

GRANT DIRECTOR: William Moore
Jane Toews
Oregon State System of Higher Education
Teaching Research
345 N. Monmouth Avenue
Monmouth, OR 97361

TELEPHONE: 505/838-1220 EXT. 391

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

Oregon has a computerized system of tracking children who are significantly handicapped and receive services in various agencies. Teaching Research is studying the long range effects of early childhood intervention in moderately and severely handicapped children. Data studied has been accumulated over a 12-year period.

Each local advisory committee develops a local comprehensive plan for county services to significantly handicapped children birth to age five.

INTERAGENCY ACTIVITIES:

The Early Intervention (El) statute of 1983 charged the Department of Education and the Mental Health Division with the responsibility of establishing rules outlining the criteria for determining which children would be eligible to be recipients of the Early Intervention program.

PENNSYLVANIA

GRANT DIRECTOR:
Jill Lichty
Rick Price
Special Education Program Advisors
Bureau of Special Education
State Department of Education
333 Market Street
Harrisburg, PA 17276-0333

TELEPHONE: 717/783-6913

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

The needs assessment is in progress. Program advisers have been selected to facilitate and coordinate the program as well as interagency and advisory council activities. Specific aspects of the comprehensive plan being addressed in addition to the needs assessment include the development of a common philosophy, the establishment of local child-find and tracking procedures, and the development of monitoring and evaluation procedures.

INTERAGENCY ACTIVITIES:

A State-level interagency council of representatives from the Departments of Health, Education, and Welfare will assist in the needs assessment. After the analysis of the results the needs assessment of the Council will assist with the development of the comprehensive plan.

PUERTO RICO

GRANT DIRECTOR:
Lucila Torres Martinez
Special Education Director (Acting)
Special Education Program for
Handicapped Children
Department of Education/Office 612
P.O. Box 759
Hato Rey, PR 00919

TELEPHONE: 809/764-8059

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

1. Identified interagency resources that will promote interagency collaboration.
2. Developed a comprehensive needs assessment of existing resources and deficiencies in service provisions.
3. Established a computerized information system for child tracking and data management.
4. Developed policies, procedures, and regulations consistent with local and Federal statutes.

INTERAGENCY ACTIVITIES:

The Department of Education is to be the lead agency in a collaborative planning effort which includes the commitment and involvement of the Departments of Health and Social Service, Head Start, and other public and private agencies and organizations, as well as parents and parent groups.

RHODE ISLAND

GRANT DIRECTOR:

Joan Karp
Tom Kochanek
Rhode Island ECSA
Rhode Island College
Department of Special Education
600 Mt. Pleasant Avenue
Providence, RI 02908

TELEPHONE: 401/456-8024

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

An extensive needs assessment study was completed and the results analyzed. The following deficiencies were uncovered and are being addressed: the need for a screening and assessment process; insufficiency of regional services; lack of an advocacy system; inadequate interagency information management systems; inadequate Statewide administrative systems; need for a legislative initiative.

INTERAGENCY ACTIVITIES:

The Departments of Education, Health, Human Services, Children and Their Families and the Departments of Mental Health, Retardation, and Hospitals (MHRH) collaborate at the administrative level in model formulation. Staff from these departments participate in six interdisciplinary task forces. The Department of Education will develop an interagency agreement with the State Head Start program.

SOUTH CAROLINA

GRANT DIRECTOR:

Helen Geesey
South Carolina Department of Education
Koger Executive Center
100 Executive Center Drive
Santee Building - Suite 824
Columbia, SC 29210

TELEPHONE: 803/758-6122

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

1. Analyzed factors necessary for comprehensive services.
2. Conceptualized, through field research, appropriate links between education and other human services.
3. Developed a comprehensive State plan.

INTERAGENCY ACTIVITIES:

The State education agency, the commissioners of the other human service agencies, and representatives of local school districts are involved in the State plan grant. Each subgrantee (three local school districts) established a local interagency advisory council, half of whose members are parents of handicapped children. These local councils will conduct analyses of services needed.

SOUTH DAKOTA

GRANT DIRECTOR:

Paulette Levinson
South Dakota Division of Education
Section for Special Education
Richard F. Kneip Building
700 North Illinois
Pierre, SD 57501

TELEPHONE: 605/773-3678

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

1. The South Dakota Division of Education completed one year of planning in the two year Planning Phase of the Early Childhood State Plan Grant programs and has opted to go into the first year of the Development Phase of the grant.
2. Since 1976, South Dakota has provided special education services to preschool children. The State Plan Grant has afforded the State the opportunity to analyze the updated needs assessment data.
3. Examined existing statutes, rules, and practices to deliver services to the birth to five handicapped population. Evidence is that the greater needs are in the components for parental involvement, personnel development, interagency and management systems, information, and coordination.
4. Formalized interagency agreements in place are to be updated.
5. Links are established with the Preschool Incentive Grant and also with LEAs.

TENNESSEE

GRANT DIRECTOR:

Mary Porter
Tennessee Children's Services Commission
Suite 1600
James K. Polk Building
Nashville, TN 37216

TELEPHONE: 615/741-2633

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

1. Developed interagency consensus about services to handicapped children and high-risk infants and their families.
2. Designed and received approval for a State plan reflecting shared service delivery responsibilities of four primary State agencies.
3. Expanded the Preschool Services Planning Committee, established a Parent's Advisors Committee, and worked with the Governor's Healthy Children Task Force.
4. Disseminated information about early intervention and diagnosis.
5. Coordinated, strengthened, and maintained in a continuum all services that identify, assess, diagnose, and serve children.
6. Continued work with the Preschool Analysis Project at Vanderbilt University to develop a system for evaluating program effectiveness.

INTERAGENCY ACTIVITIES:

Interagency coordination involves State and local agencies, parents, physicians, and related associations and groups. Participants represent the governor's office; State Departments for Education, Health, and Human Services; local public and private service providers; and Head Start.

TEXAS

GRANT DIRECTOR:	Mary Elder, Director Donna Derkacz, Coordinator Texas Department of Health Early Childhood Intervention Program 1101 West 49th Street Austin, TX 78756
TELEPHONE:	512/465-2671

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

The project will develop a computerized Statewide identification system for child identification and assurance of appropriate service.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To design a comprehensive, coordinated data collection system for children birth to age 6 years with developmental delays or at risk of developmental delay.
- To design an early childhood State plan.

INTERAGENCY ACTIVITIES:

In 1981, the Texas Legislature established the Early Childhood Intervention Program to develop a Statewide system to identify and provide services to children birth to age 6 years at risk for, or with, developmental disabilities. Four agencies (Texas Education Agency, Department of Human Resources, Department of Mental Health and Mental Retardation, and Department of Health) and a parent appointed by the governor were designated to form an Interagency Council for Early Childhood Intervention. Their charge was to establish policies and procedures to ensure successful implementation of authorizing legislation.

UTAH

GRANT DIRECTOR: Jerry Christensen
Handicapped Children's Services
2738 South 2000 East
Salt Lake City, UT 84109

TELEPHONE: 801/533-6165

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

1. Parents aided in the development of Utah's Preschool Survey and participated in on-site needs collection meetings with the Project Director.
2. The establishment of the Utah Legislation Parent Coalition was a major factor in the State Legislature passing S.B. 50 mandating services for all handicapped children ages three through five.
3. The Needs Assessment Survey was completed.

INTERAGENCY ACTIVITIES:

A Joint Interagency Coordinating Committee has the legal responsibility to coordinate all interagency efforts in Utah.

The project also has an interagency advisory board consisting of parents, preschool providers, and representatives from various agencies.

VERMONT

GRANT DIRECTOR:

Marc E. Hull
Kristen Hawkes
Vermont State Department of Education
Division of Special and Compensatory Education
120 State Street
Montpelier, VT 05602

TELEPHONE: 802/828-3141

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

Vermont has completed the two-year planning phase, including the development and completion of a Statewide needs and resource assessment, production of resource documents, draft of State Plan for Essential Early Education, resource handbook, curriculum guide, Best Practice Guide, Parent Handbook, and the establishment of a procedure and structure for long-range interagency planning.

INTERAGENCY ACTIVITIES:

Agencies involved in development of the plan include the Agency of Human Services; the Departments of Health, Mental Health, and Social and Rehabilitative Services; Vermont Head Start; and the Department of Education.

VIRGINIA

GRANT DIRECTOR:	Rick Richardson Office of Special and Compensatory Education Department of Education P.O. Box 6-Q Richmond, VA 23216
TELEPHONE:	804/225-2896

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

1. Assessed the education and related services available to handicapped children birth to age 5 years and their parents.
2. Obtained maximum input from significant and relevant groups.
3. Planned for future development of a central data registry and a single-point-of-contact referral service.

INTERAGENCY ACTIVITIES:

An interagency group reviewed progress toward the project's objectives. Four task forces from this group studied issues in depth. Ninety local needs assessments included participants from the private sector, related professions, consumers, higher education, and the medical community. Interagency activities will lay the foundation for the expansion and revision of the current State plan.

WASHINGTON

GRANT DIRECTOR:	Susan Baxter Joan Gaetz Superintendent of Public Instruction Division of Special Services Old Capitol Building Olympia, WA 98504
TELEPHONE:	206/753-1233 206/753-0317

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

Activities have included regional awareness and training conferences to introduce planning and coordination models from other states. Local planning teams have been established to guide program development. A needs assessment will examine legislative support, eligibility criteria, funding mechanisms, and service overlaps or gaps among agencies.

INTERAGENCY ACTIVITIES:

A steering committee and task force has maximized cooperation with all agencies and institutions that have interest in and responsibility for children age birth to age 6 years. Coordination is planned for activities relating to P.L. 94-142 and the Preschool Incentive Grant.

WEST VIRGINIA

GRANT DIRECTOR: Mary Pat Farrell
West Virginia Department of Education
Capitol Complex, Building 6, Room B-309
Charleston, WV 25305

TELEPHONE: 304/348-8830

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

1. Designed a Comprehensive State Plan to deliver special education and related services to children birth to age 5 years.
2. Increased Statewide awareness about benefits of existing and potential services and about the long-term effect of early intervention.
3. Assessed the current status of and specific needs for comprehensive services.
4. Established a Statewide child tracking system for preschoolers.
5. Worked closely with the State Interagency Preschool Advisory Council in developing interagency agreements needed to plan a comprehensive service delivery system and increase pubic awareness.

INTERAGENCY ACTIVITIES:

Interagency Corporation will be fostered by the State Interagency Preschool Advisory Council and by professional organizations with expertise in serving handicapped preschool children.

WISCONSIN

GRANT DIRECTOR: Jim McCoy
Wisconsin Department of Public Instruction
Division for Handicapped Children
125 South Webster Street
P.O. Box 7841
Madison, WI 53707

TELEPHONE: 608/266-1000

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

1. Assessed educational and related services available to or needed by children birth to age 5 years.
2. Created an Early Childhood State Plan in cooperation with the State Department of Health and Social Services.
3. Conducted a needs assessment using a matrix form, with help from a 20-member task force and consortium of State and local representatives.
4. Identified the need for interagency agreements, legislation, policies, and administrative systems for special education and related services.
5. Identified financial resources for identifying, evaluating, and educating children.
6. Developed dissemination system to increase awareness of services.

INTERAGENCY ACTIVITIES:

Needs assessment procedures and planning activities involve major organizations, agencies, and institutions that currently provide educational and related services.

WYOMING

GRANT DIRECTOR:	Carol Nantkes, Director State Department of Education Curriculum and Instruction Division Hathaway Building Laramie, WY 82071	Armena Taylor, Coordinator University of Washington P.O. Box 3114 University Station Laramie, WY 82071
TELEPHONE:	307/777-7414	307/766-5103

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

Provides technical assistance to early childhood program on an ongoing basis.

A needs assessment and a report on the state of the art on assessment tools and techniques for early childhood is in progress.

To promote interagency cooperation, officials attended a two-day Intermountain Interagency Inservice Institute where an advisory council, subcommittee, and a steering committee were selected.

INTERAGENCY ACTIVITIES:

Three levels of interagency activity are proposed. A steering committee of State agency administrators will review services and make recommendations. An advocacy council representing the State, parents, and services providers will assist with the needs assessment. Subgroups will help with program development.

AMERICAN SAMOA

GRANT DIRECTOR:
Jane French, Director
Caroline Clark, Coordinator
Department of Education
Special Education Division
Pago Pago, American Samoa 96799

TELEPHONE:
684/633-1323
684/633-4989

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

American Samoa's Special Education Division with the Department of Medical Services and the Division of Early Childhood Education will develop a cooperative agreement and conduct a comprehensive child-find effort. Products include a needs assessment report of services for children birth to age 5 years, a cooperative agreement document, and public awareness materials.

INTERAGENCY ACTIVITIES:

A cooperative agreement will be developed between the Early Childhood Division and the Special Education Division within the American Samoa Department of Education and the Department of Medical Services to clarify the roles and responsibilities of each in regard to child-find efforts, evaluation of current services, and public awareness. A task force of parents, professionals, and community leaders will be formed to begin planning activities.

GUAM

GRANT DIRECTOR:

Stephen Spencer
Department of Education
Division of Special Education
P.O. Box DE
Agana, Guam 96910

TELEPHONE:

011/671/4772/8906
Overseas Operator 472/8703

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS

- Developed an Early Childhood State Plan for a comprehensive service delivery system for handicapped and at risk children under age 5 years.
- Completed a needs assessment with goals of developing a matrix of services, evaluation data, a high-risk registry, and a computerized client tracking system.
- Conducted public awareness programs for parents and professionals on the value of early intervention.
- Developed a multiagency diagnostic/referral center.
- Examined needs for legislation that would increase or improve interagency service delivery.

INTERAGENCY ACTIVITIES

Grant activities will operate in conjunction with the Territorial Advisory Council of the Handicapped. Planning will involve representatives from State agencies now providing services or those that might offer services in the future. Collaboration is planned with all P.L. 94-142 programs.

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NORTHERN MARIANAS

GRANT DIRECTOR: Bobbi Figdor
Department of Education
Commonwealth of the Northern Marianas
Lower Base, Saipan
CNMI 96950

TELEPHONE: 011/670-9311

PLANNING GRANT: YEAR 2

ACCOMPLISHMENTS:

Needs assessment in progress to be submitted in near future.
Special highlights of the project are: (1) Tutuhom I Tiningo (Where Learning Begins), a quarterly newsletter; (2) a technical assistance workshop for agencies providing services to children birth to age 5 years (the workshop will deal with medical needs of children, parent interaction/counseling, and the promotion of interagency collaboration); (3) child-find brochures and public awareness information in Chamorro and Carolinian, the local languages; and (4) a needs assessment report.

INTERAGENCY ACTIVITIES:

The Department of Education will be subcontracting with: (1) the Handicapped Children's Resource Center to develop a plan for paraprofessional training; (2) the Protection and Advocacy Agency to develop a plan for parent counseling; and (3) the Crippled Children's Services to develop a plan for tracking children birth to age 5 years. Interagency agreements will be developed with the Departments of Public Health, Youth Services, and Education. An interagency group, established to act as an advisory council and task force, includes representatives from service providers and parents. A second interagency group will be formed to act as a steering committee. This group will be composed of administrators from agencies involved in services to handicapped children birth to age 5 years, as well as representatives from the legislature and the governor's office.

TRUST TERRITORIES

GRANT DIRECTOR:

Haruo W. Kuartei
Trust Territory of the Pacific
Department of Education
Special Education Programs
P.O. Box 27 CHRB
Capitol Hill
Saipan, CM 96950

TELEPHONE: 011/671-9312

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

A coordinator was hired at end of March, 1986. Needs assessment is in progress.

Reports will include an interagency contact list, a description of current and needed services, demographic information, status of current legislation, agency policies, training opportunities, and cost data. Interagency agreements are anticipated during the first years. Data collected will be entered into a computerized system. A variety of public awareness and advocacy activities are planned.

INTERAGENCY ACTIVITIES:

State and local education officials will participate in planning activities and will supply needed information, technical assistance, and related support services. Input is expected from the public health and vocational rehabilitation departments, Head Start, day care providers, Advisory Council for the Handicapped, Community College of Micronesia, Western Pacific Special Education Consortium/Early Intervention Project, MCH Project, and others.

VIRGIN ISLANDS

GRANT DIRECTOR:	Priscilla Stridiron Department of Education Division of Special Education P.O. Box 6640 St. Thomas, VI 00801
TELEPHONE:	809/774-4399

PLANNING GRANT: YEAR 1

ACCOMPLISHMENTS:

1. Developed an Interagency Council to identify and develop collaborative efforts.
2. Completed the needs assessment.
3. Conducted a comprehensive "child find" to identify handicapped and at-risk children.
4. Designed a plan for developing management and administrative standards, legislation, and policy as needed to support a comprehensive service delivery system, involving comprehensive assessment, special education and related services for all, continuum of placements, involvement of parents in development systems, and coordination and evaluation of services.

INTERAGENCY ACTIVITIES:

Interagency agreements have been completed, and cooperatives with other agencies such as the Developmental Disabilities Council have been evaluated.

A Description of Early Childhood Discretionary Demonstration Grants

ALABAMA

DEMONSTRATION GRANT

Grant Title: Helping Others Through Parent Education

Year of Funding: One

Grantee: Jefferson County Association for Retarded Citizens, Inc.

CHARACTERISTICS OF TARGET POPULATION

The project serves approximately 100 children birth to age five years. Children with any type of handicapping condition are eligible for service.

PROGRAM FOR CHILDREN

The project offers three delivery modes. The daycare program primarily serves mildly handicapped children, although some severely handicapped children are also served. The home is the second service environment. Under this plan, home therapists make home visits weekly to work with the child and train the parents. The in-center program consists of highly specialized self-contained services conducted on-site with participation by parents encouraged. Children in the daycare program are eligible for these services.

PROGRAM FOR PARENTS

Parents participate in the development of their child's individualized education plan. If possible, the parent is trained to work with the child at home. The daycare option is considered in single- or two-parent families where one or both parents work. Parents of children enrolled in the center-based program are encouraged to attend at least one out of every four sessions.

DEMONSTRATION GRANT

Grant Title: Madison Area High Risk Project

Year of Funding: Three

Grantee: Madison County Association for Retarded Citizens, Inc.

CHARACTERISTICS OF TARGET POPULATION

The project serves 30 to 40 children birth to 3 years who are considered at risk for developmental delays and other handicapping conditions. Children are identified by the local neonatal intensive care unit and by other community agencies. Families live in a predominantly rural 13-county area.

PROGRAM FOR CHILDREN

An eclectic program is provided with various curricula used to supplement the Hawaii Early Learning Profile (HELP). All children receive home therapy and attend a small group class on alternate weeks. Children also receive speech/language therapy and physical/occupational therapy as needed.

PROGRAM FOR PARENTS

Home visits with the parents are a major part of the intervention services. Parents are taught specific techniques for interacting with and teaching their children. The project's director has primary responsibility for helping parents understand and cope with their child's handicapping condition. A parent discussion time follows each biweekly group class.

ARIZONA

DEMONSTRATION GRANT

Grant Title: Developmental Infant/Sensory-Motor Project

Grantee: St. Michael's Association for Special Education

CHARACTERISTICS OF TARGET POPULATION

This project serves Navajo Indian children birth to five years of age who have congenital and genetic disorders. High priority is given to nonorganic failure to thrive and to neglected or abused infants.

PROGRAM FOR CHILDREN

Upon intake, each child is assigned to a multidisciplinary supporting team. Following assessment, the child may be routed in one of three directions: (1) the child may be served by the referring agency; (2) the child may be enrolled in the project's brief treatment program; or (3) the child may be enrolled in the project's intensive treatment program. In the brief treatment program, the child and/or family may receive crisis intervention, intense developmental guidance, or parent training over a three- to four-month period. In the intensive treatment program, the child attends a center-based program that uses the Education for Multihandicapped Infants (EMI) curriculum and addresses all areas of development for three to four months. Nonhandicapped infants spend a portion of the day in the program to serve as models. After intervention, infants in the projects are either mainstreamed into the regular school system or phased into other project classes.

PROGRAM FOR PARENTS

Parents may participate in a training program dealing with such topics as child development, observation techniques, and intervention skills. Videotapes are used extensively during training. The extended Navajo family clan system plays a vital role in the welfare and well-being of the child.

CALIFORNIA

DEMONSTRATION GRANT

Grant Title:	Childcare Options for Young Handicapped Children
Grantee:	Central Valley Children's Services Network

CHARACTERISTICS OF TARGET POPULATION

The project serves children with all types of handicaps. Approximately 40 children age six weeks to six years are mainstreamed. To be admitted into the program, the child must be able to benefit from mainstreamed group care and must require care that can be delivered in the mainstreamed setting.

PROGRAM FOR CHILDREN

The aim of the project is to increase the number of facilities that can provide quality care for young handicapped children. For this reason, the project does not serve children directly, but rather focuses on training caretakers. The training program for daycare center staff and family daycare mothers takes place over a ten-week period. Weekly sessions cover topics such as mainstreaming, community services, nutrition, how children learn, and information related to specific handicaps. Staff members provide on-site visits. When necessary, project staff contact existing agencies and secure specialized equipment for daycare homes or centers, and see that the dietary needs of the child are supplemented in eligible daycare programs.

PROGRAM FOR PARENTS

The project offers seminars in child care for the parents of young handicapped children in cooperation with an existing service. Topics covered include issues related to caring for a special needs child; information on specific handicaps, home management problems and routines; cooperation and transitions between child care and home; use of community resources; and transition into public school. The project also organizes parent support groups.

DEMONSTRATION GRANT

Grant Title:	Community Agencies Cooperating Together (ACT)
Grantee:	Stanislaus County Department of Education

CHARACTERISTICS OF TARGET POPULATION

The project serves 25 children birth to age six years who are at risk for full or partial fetal alcohol syndrome and their families. The project makes a special effort to consider the differing needs of three family groups: chronic alcoholics, teenage parents, and migrant families.

PROGRAM FOR CHILDREN

The project operates a vigorous screening effort. Children who appear to have fetal alcohol syndrome are assessed further in all areas of development, using standardized, criterion-referenced, and observational tools. Parents and project staff develop IEPs for children accepted into the program. Children and their parents are offered a wide range of services to facilitate their developmental growth, including home instruction; integration into regular education centers; speech, language, and physical therapy; support groups; and telephone consultation. Two instructional models are used: the Portage Guide to Early Education and the Individualized Critical Skills Model.

PROGRAM FOR PARENTS

Services available to parents include one-to-one educational instruction during home visits, parent training, information sharing through monthly newsletters, counseling, and peer support groups. Parent newsletters deal with topics relevant to caring for a child with fetal alcohol syndrome. The project also carries out seven parent education sessions using the "Connections" modules.

DEMONSTRATION GRANT

Grant Title: Children in Hospitals: A Model Program (CHAMP)

Grantee: UCLA Department of Pediatrics, Center for Health Services

CHARACTERISTICS OF TARGET POPULATION

The program serves hospitalized chronically ill children birth to age 5 years and their parents. Children have leukemia, solid tumors, nonfunctional gastrointestinal systems (and must be fed intravenously), or end stage of renal or kidney disease, or have undergone vascular or cardiac surgery. More than 30 families have participated in the program.

PROGRAM FOR CHILDREN

The project helps hospitalized chronically ill young children develop healthy interactions with their parents and optimal cognitive and emotional growth. An Individual Intervention Plan is designed for each child based on an assessment of the child and family's needs. Each child participates in play activities individually or in a playroom program. Parents and surrogate parents are assisted in providing consistent daily caretaking sensitive to the child's needs and play activities based on the child's developmental level. Interactions with peers are introduced to maintain socialization experiences.

PROGRAM FOR PARENTS

Services for parents are designed to help parents gain confidence in planning for their children's total needs. Specific therapeutic interventions are made to make aspects of caregiving more satisfying. Parents are interviewed to determine attitudes toward illness and concerns before, during, and after hospitalization. Interactions between mother and child are observed. A Parent Satisfaction questionnaire is administered post hospitalization. Parenting stress and impact of the illness on the family are also being assessed. A parents' group meets twice weekly to help parents deal with stresses associated with hospitalization.

DEMONSTRATION GRANT

Grant Title:	Supported Transition to Integrated Preschools (Project STIP)
Grantee:	Department of Special Education San Francisco Unified School District

CHARACTERISTICS OF TARGET POPULATION

The project serves children age three to five years who demonstrate "intensive special education and services needs," including mild to severe and multiple disabilities.

PROGRAM FOR CHILDREN

The project provides comprehensive and coordinated services to families, children, and professionals during the child's transition from early intervention programs to model integrated preschool classes. Children enrolled in special education classes are integrated into existing child development and Head Start classes based on needs and abilities. Instruction in the integrated classrooms is provided in small groups in which nonhandicapped peers serve as models for the disabled children. The curriculum design emphasizes the teaching of developmental and functional skills in integrated settings.

PROGRAM FOR PARENTS

Three parents serve on the advisory council. One parent is hired by the project to provide input to the project and assist with dissemination activities. Parents complete needs assessment surveys and complete follow-up questionnaires to assess the quality and impact of services. Based on the needs assessment, project staff create materials and a support network for parents as their children move from early intervention programs or from no early intervention into public school special education classes at age three years.

DEMONSTRATION GRANT

Grant Title: Project PROTECT

Grantee: UCLA Intervention Program
University of California at Los Angeles

CHARACTERISTICS OF TARGET POPULATION

Approximately 20 to 25 infants who have been exposed prenatally to drugs are served prenatally and during the first 18 months of life. The project addresses needs of the infant, biological parents, foster parents, and staff.

PROGRAM FOR CHILDREN

Infants identified during the prenatal period receive intervention through their mothers to promote a healthy delivery by improving the nutrition of the mother and supporting her as she resists further drug use. During the newborn period, a pediatrician and infant development specialist assess the infant's status medically, behaviorally, and nutritionally. From these assessments, project staff develop an intervention plan to provide a stable environment with modification of the amount of stimuli and with carefully paced introduction of appropriate cognitive and social experiences. Home visits by the infant development specialist provide the core of the intervention for the infant. When the infant reaches age 18 months, project staff, with the biological and/or foster parents, assist in the infant's transition into community program(s).

PROGRAM FOR PARENTS

Intervention with the biological parent(s) focuses on individual needs of the substance abusing parent(s) through counseling. Project staff assist the parent(s) in developing an understanding of the medical, developmental, and environmental needs of the infant. Supportive services begin during pregnancy and continue for the 18-month period following the infant's birth. When an infant exposed prenatally to drugs is placed in foster care, the supportive services of a foster parent associate and the educational services of the infant development specialist are provided for the foster parent(s).

DEMONSTRATION GRANT

Grant Title: Parents and Visually Impaired Infants (PAVII)

Grantee: Blind Babies Foundation

CHARACTERISTICS OF TARGET POPULATION

The project serves 20 visually impaired children birth to age three years. Children vary in degree of visual impairment, as well as in additional physical, mental, or developmental disabilities.

PROGRAM FOR CHILDREN

The project operates a home-based program offering weekly home visits by project staff to families of visually impaired infants and preschoolers. The social basis of learning and the parent's role as an interventionist are emphasized. The project is developing its own curriculum, the Socially Based Curriculum, which integrates intervention into daily home routines.

PROGRAM FOR PARENTS

The parent program seeks to develop and promote parental observation and teaching skills, to promote parents' sense of competency through mutually satisfying interactions with the infant, and to increase parent responsiveness to infant behaviors. Parent training uses a "microteaching" approach involving videotapes and immediate feedback. Parents and children also participate in a weekly parent education/play class with sighted infants and their parents. The project offers a support/counseling group which is facilitated by the project psychologist.

COLORADO

DEMONSTRATION GRANT

Grant Title: INREAL Model Demonstration Program

Grantee: University of Colorado Health Science Center

CHARACTERISTICS OF TARGET POPULATION

The project serves 18 to 20 children age three to six years who have been physically or sexually abused and who are also developmentally delayed.

PROGRAM FOR CHILDREN

The social, emotional, and educational needs of the handicapped abused child are the focus of the project's activities. The project offers a continuum of services. The most severely handicapped children are enrolled in the Kempe Center's self-contained preschool, while the community-based program serves abused children within the local preschool, daycare center, or public school with weekly on-site visits. Services include family interactional analysis, standardized and play assessments, home and on-site visits, direct service in the classroom, individual therapy, family therapy, and parent groups. the INter-REActive Learning method (INREAL), a non-stigmatizing, naturalistic, child-centered approach, is used in all settings within a psychoeducational therapeutic model. Children are followed through the second grade.

CONNECTICUT

DEMONSTRATION GRANT

Grant Title:	Family Infant Resource Stimulation Team (FIRST)
Year of Funding:	Three
Grantee:	Cheshire Department of Education

CHARACTERISTICS OF TARGET POPULATION

The project provides educational programming for 12 to 15 moderately to severely handicapped children and less intense support for 40 to 50 other children, birth to age 3 years. Children accepted into the program have a significant delay in two or more developmental areas, a serious trauma (such as a major illness), or inadequate parenting. The primary caretaker must be willing to participate in the program.

PROGRAM FOR CHILDREN

The project provides a combined home- and center-based program with flexible scheduling. Children attend the center-based program one to three days weekly for one and one-half to two and one-half hours daily. Home visits (60 to 90 minutes) occur once or twice monthly to provide the parent with advice on how to arrange the home environment to foster development of the child. In the center-based program, the teacher and parent observe the child at play, develop hypotheses, intervene, and evaluate the impact of changes.

PROGRAM FOR PARENTS

Parents are involved in all aspects of the program, from the initial evaluation to exit. The program is intended to involve the whole family, including grandparents and siblings. Consultants and specialists are available to help parents as necessary. Parent progress is measured using a project-developed questionnaire. Responses of parents involved in the program are compared to the responses of parents not involved in the program.

DISTRICT OF COLUMBIA

DEMONSTRATION GRANT

Grant Title:	Chronically Ill Infant Intervention
Year of Funding:	One
Grantee:	Georgetown University Hospital Child Development

CHARACTERISTICS OF TARGET POPULATION

The project serves 16 infants who require prolonged (more than 10 weeks) care in the intensive care nursery (ICN) because of acute medical problems. The majority of the infants served are premature and have prolonged needs for respiratory support.

PROGRAM FOR CHILDREN

The project provides educational intervention for chronically ill infants from the ICN until their entrance into community-based programs. During the infant's stay in the ICN, the project provides a comprehensive sensorimotor intervention program which is incorporated into the child's medical management plan. Before discharge, the project nurse makes a home visit and coordinates services of existing community resources. During the home component, direct services are provided using Learning Games for the First Three Years. During the child's second and third years, the intervention program shifts from the home setting to a center-based program.

PROGRAM FOR PARENTS

Prior to the child's discharge from the ICN, the project team works with the family to help prepare for transition to home care. The family receives training and support in managing health needs and in carrying out the educational program. Once a month, parents meet at the hospital for a parent group.

DEMONSTRATION GRANT

Grant Title:	Parents and Preschoolers in Transition
Year of Funding:	One
Grantee:	Easter Seal Society for Disabled Children and Adults, Inc.

CHARACTERISTICS OF TARGET POPULATION

The project serves 54 preschoolers, age two to four years, and 80 parents. Among the children's handicapping conditions are cerebral palsy, Down's Syndrome, seizure disorders, muscular dystrophy, and orthopedic disabilities. Most of the children are severely multihandicapped. All of the children served are currently enrolled in a preschool program for handicapped children.

PROGRAM FOR CHILDREN

The overall goal of this program is to prevent the regression that typically occurs in children when they move from one program to another. The program consists of visits by the project coordinator or the child's sending teacher to the receiving school. Initially, the visits take place to orient the receiving school to the project. Later, the child's sending teacher, therapist, or project coordinator observes the preschooler in his new environment and confers with the new teacher regarding the child's therapeutic program. Upon request, the sending teacher may provide consultation or demonstration related to appropriate activities or resources for the child.

PROGRAM FOR PARENTS

Parents going through the transition process with their child for the first time are linked with a parent "buddy" who has successfully navigated a transition experience. The buddy parents are available via telephone for support and consultation. The project oversees a training program for parents who serve in this role. Project parents also are offered training in stress reduction and in appropriate procedures for transition and follow-up activities. All parents whose children are in the transition program are invited to give the project direction. Several parents serve on the advisory board.

DEMONSTRATION GRANT

Grant Title:	Un Buen Comiengo/A Good Beginning
Year of Funding:	Two
Grantee:	Rosemount Center

CHARACTERISTICS OF TARGET POPULATION

The program serves 17 mildly to moderately handicapped infants and toddlers, mostly Hispanic, who have working parents who would benefit from a mainstream bilingual and multicultural day-care setting. Project staff members also train family home providers to work with handicapped infants and toddlers.

PROGRAM FOR CHILDREN

Comprehensive services are provided within the infants' regular care environment. A transdisciplinary team consults regularly with classroom teachers and provides inservice training for teachers and family home providers. The project uses English and Spanish versions of the Portage Project, the Individual Program, and multicultural and bilingual materials developed by Rosemount Center.

PROGRAM FOR PARENTS

Parent services include daily written reports of child activities, weekly conversations with teachers, parent support groups, topical meetings, and three conferences yearly. Family assessment instruments include the Home Observation for Measurement for the Environment and bilingual materials developed by Rosemount Center.

DEMONSTRATION GRANT

Grant Title:	Adolescent-Infant Development Program
Year of Funding:	Three
Grantee:	Department of Pediatrics and Child Health Howard University Hospital

CHARACTERISTICS OF TARGET POPULATION

The project provides intensive services for 15 to 20 infants and toddlers birth to age 3 years whose parents are adolescents (age 19 years or younger). Mothers can be referred to Project AID based on medical criteria for medium to high risk of delivering a handicapped infant. AID also identifies and screens 250 adolescents each year.

PROGRAM FOR CHILDREN

Individual education plans are developed based on assessment information. During the first year of life, the infant or toddler receives regular 30- to 60-minute enrichment sessions in the home. The child is evaluated yearly to determine progress and to update goals and objectives. Infants are often identified at the neonatal intensive care nursery, and intervention may begin there and continue in the home.

PROGRAM FOR PARENTS

Parents are involved in all phases of the program. From the prenatal period through the delivery of the infant and the first three years of the infant's life, parents are instructed and assisted in the medical, educational, developmental, nutritional, and safety needs of their infants. Parents also are helped with their personal development and educational needs (help with school plans, information on job training, employment, daycare).

FLORIDA

DEMONSTRATION GRANT

Grant Title:	Strategic Training for Rural Education Targeting Children Who are Handicapped (Project STRETCH)
Year of Funding:	Three
Grantee:	Alucha County Association for Retarded Citizens

CHARACTERISTICS OF TARGET POPULATION

The project serves handicapped children birth to age 5 years who live in rural Florida.

PROGRAM FOR CHILDREN

Professionals make weekly visits to the home. One focus of the project is to help parents enjoy their child, so play activities are demonstrated to encourage positive interaction. The project also tries to help parents learn to develop instructional objectives for their children, observe developmental milestones, and record daily progress. Parents and the child development specialist develop individual education plans (IEP) for the children.

PROGRAM FOR PARENTS

Parents' needs are assessed when they enter the program, and goals are formulated. Parents also fill out the Parenting Stress Index (PSI) which reflects the level of stress they feel in 14 different domains. Parents are offered a variety of options which include individual instruction, family support meetings, small-group meetings, monthly parent meetings, involvement on the advisory council, Saturday morning workshops, toy-making workshops, and sibling meetings. An individual family plan is developed for each family based on parent needs, the PSI, the HOME, and observations.

DEMONSTRATION GRANT

Grant Title:	High School/Preschool Partnership Program
Year of Funding:	Three
Grantee:	School Board of Pinellas County

CHARACTERISTICS OF TARGET POPULATION

The project serves three populations: (1) ten mildly to moderately handicapped and 20 nonhandicapped children age 3 to 6 years; (2) high school students enrolled in a child care program who are interested in careers in child care, early childhood, special education, and allied fields; and (3) infants birth to age 3 years who need to be screened for possible disabilities. The handicapped children have physical, visual, and hearing impairments; speech and language disabilities; or mild to moderate retardation.

PROGRAM FOR CHILDREN

The handicapped children are enrolled full-time in a district class for prekindergarten children with varying exceptionalities. They are fully mainstreamed with community preschoolers three mornings weekly. Each handicapped child has an individual education plan (IEP). The community toddler screening program is offered several times per year at no charge.

PROGRAM FOR PARENTS

Parents help evaluate the program, develop IEPs for their children, and serve on the advisory committee. Bimonthly parent groups meetings are held throughout the county. Parents also are encouraged to volunteer in the classroom or observe.

GEORGIA

DEMONSTRATION GRANT

Grant Title:	Contingency Response Intervention for Infants of Adolescent Parents
Grantee:	Northeast Health District, Clark County Board of Health

CHARACTERISTICS OF TARGET POPULATION

The project serves potentially handicapped infants of adolescent mothers. Eligibility is determined on the basis of both biological risk factors and parent and family variables. Twenty infants and their families will be served. Children are served through their second birthday or until they are no longer considered at risk (based upon established criteria).

PROGRAM FOR CHILDREN

Initial contact between the high-risk expectant parent and the family intervention specialist (FIS) takes place in the prenatal clinic. Within three days after the baby is born, the FIS visits the mother in the hospital; they discuss what to expect when the child is brought home and the importance of quality interactions between the mother and child. Home visits are made weekly for the first eight weeks, biweekly for the next 24 weeks, and monthly through the time the child reaches 24 months of age.

PROGRAM FOR PARENTS

The project attempts to help families overcome environmental problems which may interfere with the child's well-being or development. Through a questionnaire, the FIS identities the needs of the home and makes referrals to the appropriate agencies. During home visits, the FIS redirects the parents' most negative responses toward more positive alternatives. During in-home teaching sessions, the FIS interprets the baby's behaviors for the parent and models appropriate responses.

DEMONSTRATION GRANT

Grant Title:	Ho'opa Ola Project
Grantee:	Communications Disorder Clinic Kapiolani Women's & Children's Medical Center

CHARACTERISTICS OF TARGET POPULATION

This project serves 10 - 12 infants under 30 months of age, with a hearing loss of sufficient degree to require amplification.

PROGRAM FOR CHILDREN

The project has adopted the SKI-HI curriculum to meet the linguistic and cultural needs of families from three ethnic backgrounds. The project offers a flexible range of home-based and clinic-based services.

IDAHO

DEMONSTRATION GRANT

Grant Title: Family Involvement with At-Risk and Handicapped Infants

Grantee: Special Education Department, University of Idaho

CHARACTERISTICS OF TARGET POPULATION

The project serves at-risk and handicapped infants birth to age 3 years and their families, regardless of the type or severity of handicap.

PROGRAM FOR CHILDREN

Child and family needs are considered simultaneously in programming decisions. After family and child are assessed, objectives for the entire family unit are identified. Parents select from service options that include: (1) a home-based program of early intervention; (2) a mainstream center-based program for the infant; (3) a program that combines the home- and center-based options; (4) parent support activities; (5) infant/caregiver interaction training groups; and (6) instructional classes based on family needs. The curriculum for child intervention is based on the Systematic Instruction Model. Children work on sensory-motor, motor-communication, social, and self-care skills.

PROGRAM FOR PARENTS

At entry, a family profile is obtained that includes a needs assessment, stress evaluation, assessment of coping strategies and family adaptability, and an analysis of family responsibilities and roles. Families and staff develop a Family Intervention Plan that incorporates the strengths and needs of all members. Families then select a series of goals which are consistent with their profile. Examples of family services are assistance with accessing resources, family counseling, support groups, parent-to-parent activities, parent education on infant intervention, and direct involvement with infant programming in the classroom and in the home.

DEMONSTRATION GRANT

Grant Title: Neighborcare: Integrated Family Day Care Home Model

Grantee: Purdue University

CHARACTERISTICS OF TARGET POPULATION

The project serves approximately 6 to 12 handicapped children birth to age 5 years. Children are served regardless of their handicap with the exception of those having severe physical disabilities.

PROGRAM FOR CHILDREN

One of the project's goals is to increase both the level and the coordination of services to handicapped preschool children. A second goal is to provide full-time child care and educational services for handicapped preschool children in mainstreamed family day-care homes (FDCH). A third goal is to train FDCH providers to care for handicapped children. Providers can choose to enroll in the Child Development Associate program, a nationally recognized field- and competency-based training program for early childhood educators. FDCH providers are also trained to use the HICOMP Curriculum and prescriptive teaching techniques and to develop individual education plans (IEP). After successful completion of training, providers receive a Neighborcare certificate.

DEMONSTRATION GRANT

Grantee: The Capper Foundation

CHARACTERISTICS OF TARGET POPULATION

The project serves 18 to 20 children age 2 years 9 months to school age who are primarily physically handicapped and have secondary handicaps in fine- and gross-motor, speech, language, cognitive, and social skills. Ten nonhandicapped preschoolers are also served.

PROGRAM FOR CHILDREN

The project implements a reverse mainstreaming program. By offering full-time day care, the project attracts parents who enroll their nonhandicapped children in the existing program for developmentally delayed children. Staff members identify strategies and methods to facilitate interaction between handicapped and nonhandicapped children and the participation of nonhandicapped children as models in treatment.

KENTUCKY

DEMONSTRATION GRANT

Grant Title:	Sequenced Transition to Education in the Public Schools (STEPS)
Year of Funding:	Two
Grantee:	Child Development Centers of the Bluegrass, Inc.

CHARACTERISTICS OF TARGET POPULATION

The project has developed procedures to be used by agency preschools which serve 180 handicapped children birth to age 5 years with follow-up services to children age 6 years who have exited the preschool programs. Handicapping conditions of children served include one or more significant delays in major developmental areas (fine/gross motor, speech/language, cognition, and social/self-help skills). Severity ranges from mild to severe/profound levels.

PROGRAM FOR CHILDREN

The goal of the project is to develop and implement a community-wide interagency model for facilitating the successful transition of handicapped children from preschool programs to the least restrictive environment placements in public schools. The project establishes an interagency agreement plan with the public school outlining how children will move from preschool into public school and how teachers and project personnel will collaborate to place the child in the least restrictive environment. Transitional class options have been developed according to each child's individual needs.

PROGRAM FOR PARENTS

Parent involvement is a key factor in the successful transition of handicapped children from preschool programs to the public school. The project sponsors a multilevel parent program which includes group inservice, individual inservice, parent newsletter, a parent resource center network, and linkage to supplemental services. During the transition year, parents are informed of advocacy issues and are introduced to the various service options available to their children. Individual educational plans include objectives related to parent linkage to the public school.

DEMONSTRATION GRANT

Grant Title: Direct and Indirect Service Delivery to Handicapped Infants of Teenage & Adult Single Parent Families

Year of Funding: Two

Grantee: Rosenwald Child Development Center
Kentucky State University

CHARACTERISTICS OF TARGET POPULATION

The project serves 20 children, birth to age 3 years, of teenage and adult single-parent families. Children served are developmentally delayed or high-risk for developmental delay. Biological and environmental risk factors are used to determine eligibility for service.

PROGRAM FOR CHILDREN

Children receive one and one-half hours of intervention services weekly. Older children attend group activities in the project classroom biweekly. Home-based services are provided for younger infants and their families and for other children when required due to family situation. During the home-based sessions, the teacher and parent discuss the child's past performance, develop an instructional plan, and implement the plan and activities.

PROGRAM FOR PARENTS

A teen parenting program, in cooperation with the local hospital and public schools, is provided for single, teen parents, age 17 years and younger. Adult single parents, age 18 years and older, participate in another program. In both programs, parents and families receive information and support through family life classes, parent-to-parent groups, and counseling. Parents and families are encouraged to participate directly in the instructional planning, implementation and evaluation of their child's program. Individual notebooks of instructions and activities are developed by staff members and parents to facilitate parents' interaction with their children at home.

MAINE

DEMONSTRATION GRANT

Grant Title: Preventive Retention Project

Grantee: Department of Mental Health and Retardation

CHARACTERISTICS OF TARGET POPULATION

Approximately 80 infants will be identified and served each year. Risk categories include organic physical and mental handicaps, circumstances of birth, and environmental conditions that could be expected to lead to emotional or behavioral disorders or developmental delays. The program also serves the families of these infants.

PROGRAM FOR CHILDREN

The project's objectives are: to institute comprehensive newborn screening procedures and subsequent assessments; to develop an interagency, multidisciplinary service system using existing service providers; to measure the effectiveness of the screening and service delivery systems; to provide staff development and training; and to disseminate the model throughout the State in anticipation of Statewide replication. Screening to identify handicapped and at-risk children takes place during pregnancy, at delivery, or during the perinatal period. After assessment, these children are referred to "Family Support Teams," drawn from private and public agencies.

PROGRAM FOR PARENTS

Parent-child interactions are measured using the Home Observation for Measurement of the Environment (HOME), structured home observation scales, and the Feeding Scale. Measures of family functioning include the Schedule of Recent Events, the Family Support Scale, and the Questionnaire of Resources and Stress.

DEMONSTRATION GRANT

Grant Title: Washington County Children's Program

Year of Funding: Three

Grantee: Child and Youth Board of Washington County

CHARACTERISTICS OF TARGET POPULATION

The project serves handicapped children birth to age 3 years and their families in rural northeastern Maine. The parents must be willing to be involved and cooperate with programming for their child.

PROGRAM FOR CHILDREN

The project trains local residents, known as town home advisors, to provide services to handicapped children and their parents. The project offers a combination home- and center-based program. The home-based facet of the program is designed to meet the specific needs of the child and the parent. On alternate weeks, when home visits do not occur, the parents, children, and staff members participate in a two-hour group session at the center.

PROGRAM FOR PARENTS

The project develops an individual education plan (IEP) for each child's primary caregiver. The IEP is based on assessment (using the NCAST Assessment Scales developed by the University of Washington School of Nursing) of the parent's skills in three areas: feeding, teaching, and the home environment. The parent and town home advisor work together to develop activities to improve the parent's skills in weak areas. A family support specialist works with the families and project staff members to provide supportive mental health services. The project offers parent support and education groups.

DEMONSTRATION GRANT

Grant Title:	Rural Utilization of Resources to Awaken Learning (RURAL)
Year of Funding:	Three
Grantee:	School Administrative District #62

CHARACTERISTICS OF TARGET POPULATION

The project serves six to nine children age 3 to 5 years. Most children accepted into the program display mild to moderate handicaps (developmental delays; emotional, social, or behavioral problems; physical handicaps; speech or language impairments).

PROGRAM FOR CHILDREN

The project provides an integrated learning experience in a center-based classroom. The curriculum focuses on the development of the child's social, cognitive, and motor skills. Therapeutic sessions are interspersed with opportunities to participate in more traditional preschool experiences such as sand and water play, painting, and dress-up. In addition to individualized classroom experience, handicapped children may participate in other instructional experiences including individual tutorial sessions, specialized small-group instruction, and home-based training.

PROGRAM FOR PARENTS

Parents are encouraged to use their talents and skills to contribute to the program. Parents may serve as aides in the classroom, make instructional materials, and host parent meetings. Activities for parents are based on identified needs and are provided by a parent support group.

MASSACHUSETTS

DEMONSTRATION GRANT

Grant Title:	Parents and Children Together (PACT)
Year of Funding:	Three
Grantee:	South Shore Mental Health Center Inc.

CHARACTERISTICS OF TARGET POPULATION

PACT serves 45 high-risk children and children with special needs birth to age 5 years whose parents are incarcerated or are being treated for alcoholism or drug addiction. Parents must be receiving services from an adult agency represented on the PACT board.

PROGRAM FOR CHILDREN

The project acknowledges that parents' basic needs must be met before they can meet the needs of their children. The project offers direct and transition services to children and their families. The project brings together a board of adult, child, and social service agencies to form a transagency alliance which results in a comprehensive, family-focused service plan for children and their parents.

PROGRAM FOR PARENTS

First, families receive short-term, intensive, home-based services. Then, the families are supported and trained in advocacy skills while they are phased into existing community agencies and educational programs. Finally, follow-up support is provided to the family while consultation and technical assistance is provided to the accepting agency. The project also offers education and support groups for adult agency staff and parents.

DEMONSTRATION GRANT

Grant Title: Pathways for Children

Year of Funding: Three

Grantee: Enable, Inc.

CHARACTERISTICS OF TARGET POPULATION

The project serves children with life-threatening illnesses or degenerative diseases. Children served are birth to age 3 years and profoundly ill and at home; age 3 to 8 years and homebound due to their debilitating medical conditions; and age 3 to 8 years and able to function in a school setting.

PROGRAM FOR CHILDREN

Project staff members try to maximize each child's developmental potential and increase each child's ability to cope with death and degenerative disease. Services are determined by the child's condition and include individual play therapy. Staff members teach professionals to better serve seriously ill children and support classmates.

PROGRAM FOR PARENTS

Direct intervention includes support groups for parents and individual support for siblings, resource packets, and instruction for home-care management. All services are aimed at maintaining the child in the least restrictive environment, preparing the family to cope with anticipated changing educational needs and services as the child's condition deteriorates, and maximizing choices available to the family.

DEMONSTRATION GRANT

Grant Title: Infant-Toddler Demonstration Project

Year of Funding: Three

Grantee: Language and Cognitive Development Center

CHARACTERISTICS OF TARGET POPULATION

The project serves children under age 30 months who exhibit unusual social-emotional behavior patterns and developmental, speech, and language delays of six months or more. Typically, the children have neurological problems, exhibit autistic or autistic-like syndromes, or have experienced severe emotional or environmental deprivation. Over the three-year grant period, the project will screen about 60 children and initiate treatment for 20 to 30 children. One-third to one-half of the children served are Hispanic and/or Black.

PROGRAM FOR CHILDREN

The project provides screening, identification, and early intervention for children. Two one-hour sessions with the parent and child involve intensive cognitive developmental work within the structure of the child's relationship with the parent. Regular home visits are made monthly to generalize program activities from center to home.

PROGRAM FOR PARENTS

Parents are required to help instruct their children and attend a seven-session parent education workshop. Parents receive emotional support from weekly parent support groups, therapy, family advocacy, sibling services, and sign-language classes.

DEMONSTRATION GRANT

Grant Title: Identification and Remediation of an At-Risk Preschool Population

Grantee: Children's Language Institute, Inc.

CHARACTERISTICS OF TARGET POPULATION

The project serves neurologically impaired, language- and learning-disabled children age 2 1/2 to 5 years.

PROGRAM FOR CHILDREN

The project prepares preschool, language- and learning-disabled children for successful entry into regular school and helps them attain a level of success commensurate with their level of intelligence. Children attend a half-day program five days weekly. A project-designed curriculum combines language and cognitive learning. Four normal children are enrolled in the classroom as peer models. A general preschool framework is used for class scheduling, though all curriculum is language based.

PROGRAM FOR PARENTS

A social worker leads weekly group counseling sessions and parent workshops for training in child development and behavior management techniques. Individual counseling sessions and home visits are scheduled as needed. The speech/language pathologist visits each child's home five times a year to consult individually with the family about appropriate experiences for the child.

MICHIGAN

DEMONSTRATION GRANT

Grant Title: Family Day Care Project

Grantee: Family Day Care Project

CHARACTERISTICS OF TARGET POPULATION

This project trains family day-care providers from Washtenaw County to care for children with special needs. Day-care providers register for a series of seminars and workshops and receive regular home visits from the special services coordinator. A special effort is made to reach those people already providing day care to handicapped children.

PROGRAM FOR CHILDREN

Practical seminars span eight-month intervals. The curriculum focuses on four areas of special care: physical, cognitive, emotional, and sensory. Trainees are taught observation and screening techniques, behavioral management, and special care techniques. Some seminars address parenting skills with emphasis on the interaction between children and the providers. Child development workshops stress understanding of cognitive stages and how these relate to the planning of appropriate activities for children. Enrollees are exposed to issues related to the care of adopted, biracial, abused, neglected, and at-risk children and infants.

MISSISSIPPI

DEMONSTRATION GRANT

Grant Title:	Language Development Model - Choctaw
Year of Funding:	Three
Grantee:	Handicapped Children's Early Education Mississippi Band of Choctaw Indians

CHARACTERISTICS OF TARGET POPULATION

The project serves handicapped Choctaw Indian children birth to age 5 years.

PROGRAM FOR CHILDREN

Staff members visit the home once a week to teach and train parents. Meetings are held once a month for parents to share concerns and common problems in raising children with special needs. The first effort of the program is to help parents understand their handicapped children. The goal of the program is to increase the children's language development. Materials from the Portage Parent Program and Portage Parental Behavior Inventory are used to help children's language development. Following the Portage Guide to Early Education, staff members write individual activity charts and language development guides that focus on traditional Choctaw arts and crafts (sewing, cooking, music, art, wood working, beading, basketry, weaving).

PROGRAM FOR PARENTS

Parents are considered primary educators of their children. Staff members train parents to teach their children English language skills; refer families for medical, psychological, and social services; provide parents with education experiences; organize support groups; and involve parents in the planning and operation of the project.

MONTANA

DEMONSTRATION GRANT

Grant Title: Co-TEACH

Grantee: University of Montana

CHARACTERISTICS OF TARGET POPULATION

The project serves eight and four year old handicapped children, all of whom will be eligible for public school special services in the years subsequent to their enrollment in "Co-TEACH." At least four of six handicapping conditions are present: mild mental retardation, moderate to severe mental retardation, sensory impairment, physical or medical problems, multiple handicaps, and autistic or autistic-like behavior.

PROGRAM FOR CHILDREN

The major aim of this project is to ensure that child progress observed in early intervention programs is maintained. Features include assessment of adaptive behavior requirements in receiving classrooms, child training in academic independence and social competence, involvement of receiving teachers in the preschool program, and use of a "buddy system" in which older students are paired with younger handicapped students.

PROGRAM FOR PARENTS

Parents participate each week in the classroom. Parents learn through on-the-job training, and, when necessary, through workshops and short courses, and train other staff to carry out their child's therapy program. Later, parents train the receiving teacher to deliver preschool-developed therapy programs.

NEBRASKA

DEMONSTRATION GRANT

Grantee: Department of Psychology, University of Nebraska

CHARACTERISTICS OF TARGET POPULATION

The project serves children birth to age five years of varying cognitive abilities who have severe motor impairments. Most are nonambulatory and have essentially no functional hand use. Ten children are served in preschool classrooms; six infants and toddlers will be served in homebound programs.

PROGRAM FOR CHILDREN

The primary goal of the project is to enable children to control aspects of their environment through the use of microcomputers. Following a comprehensive assessment of the child's needs, project staff select and adapt appropriate hardware and software. Switches to operate the computers are selected for each child, taking into account the child's positioning requirements and range of movement. The children use software programs that are designed to build social and self-help skills as well as cognitive and communication skills.

The model project is carried out within an existing public school program for handicapped infants and preschoolers. Preschool-age children attend preschool five days weekly for four hours each day. Infants are enrolled in a home-based program which offers two one-hour home visits weekly, as well as the supplemental services of an occupational therapist and a physical therapist.

NEVADA

DEMONSTRATION GRANT

Grant Title:	Parent and Child Early Education Resources (PACEER)
Grantee:	Research and Educational Planning Center University of Nevada - Reno

CHARACTERISTICS OF TARGET POPULATION

This project serves children birth to age 3 years who are severely to profoundly handicapped or are at medical or environmental risk for developmental delays. Normally developing peers also are served. The project expects to serve 45 children during the three years of the demonstration grant.

PROGRAM FOR CHILDREN

The project offers weekly Toddler Group and Parent/Child Group sessions at the center. Individual sessions in the home or center are available weekly. Based on assessment information and parent input, individual development goals are established in the areas of cognition, communication, motor, social, and self-help. Therapy services are provided on a consultation basis. Nonhandicapped peers and siblings are involved in the program.

The project conducts inservice staff development activities and, through the University of Nevada at Reno, provides a site for professional preservice and inservice training.

PROGRAM FOR PARENTS

The project works to enhance interactions between parents and children. Parents are asked to be present and to participate in all individual sessions with their child. The project offers opportunities for classroom volunteering, parent groups, group parent-child sessions in the classroom, and special speakers and individual counseling led by the parent coordinator. A Dad's Group meets monthly. Classes are offered in topics such as child development, advocacy, legal issues, and coping with stress. Parents are involved in project planning, child assessment, program implementation, and evaluation. A family assessment tool has been developed and implemented.

DEMONSTRATION GRANT

Grant Title:	Children's Optimal Progress in Neurodevelopmental Growth (COPING)
Grantee:	John F. Kennedy Medical Center

CHARACTERISTICS OF TARGET POPULATION

COPING serves families with children birth to age 3 years who have neuromotor dysfunction as evidenced by abnormal muscle tone, postural instability, developmental delay, and problems of sensory integration.

PROGRAM FOR CHILDREN

The COPING program integrates medical, therapeutic and educational services designed to enhance the life outcomes of children by increasing their development skills and adaptive coping behaviors. Intervention focuses on increasing the children's developmental capabilities in the areas of postural control, mobility, manipulation, cognitive processing, and communication. Specific strategies are used to help the children learn to cope more effectively in their day-to-day environments. Children receive services one to three days per week in center- or home-based settings.

PROGRAM FOR PARENTS

A Coping with Stress model is used as the basis for intervention with families. Parents use self-rated assessment instruments to identify their stressors, coping resources, and vulnerabilities, and collaborate with project staff to develop personalized family intervention plans.

DEMONSTRATION GRANT

Grant Title:	Language Interaction Intervention Project
Grantee:	Rutgers Medical School

CHARACTERISTICS OF TARGET POPULATION

The project serves children age 2 to 5 years who exhibit cognitive and language delays.

PROGRAM FOR CHILDREN

The project is designed to train mothers to communicate effectively with their children and to improve their children's communication. Children and mothers receive two hours of programming twice weekly. For the first hour of programming, mothers and children are separated. Mothers are trained in the use of language and application of specific techniques. Children are involved in developmentally appropriate activities with a speech pathologist. During the second hour, mothers participate in the classroom with their children.

PROGRAM FOR PARENTS

Mothers participate in biweekly training sessions designed to: (1) increase understanding of principles of early language development; (2) increase understanding of how their own speech contributes to the children's language development; (3) increase ability to map the objects, events, and actions in the children's seeable world; and (4) increase ability to respond contingently to their children's communications. Mothers participate in classroom activities with their children and practice skills and techniques learned in the workshops. Biweekly home visits are made to encourage generalization of skills from the classroom to the home.

NEW MEXICO

DEMONSTRATION GRANT

Grant Title: Training in Parenting Skills (TIPS)

CHARACTERISTICS OF TARGET POPULATION

The project serves 20 families, each of which has at least one developmentally disabled parent serving as primary caretaker to children birth to age six years.

PROGRAM FOR CHILDREN

The activities of the project are primarily directed toward the parents and community service providers, although the goal of the project is to reduce or eliminate the risk for developmental disabilities in children whose parents are developmentally disabled. Intervention takes place in the home, the project's home-type center, and settings in other agencies. Individual sessions and weekly play groups for parents and children are designed to meet the individual needs of the child. Project staff assist parents in finding the most appropriate educational and social setting for the children served.

DEMONSTRATION GRANT

Grant Title: Parent-Infant, Growth, Advocacy and Planning (GAP)

Grantee: University of New Mexico, School of Medicine
Department of Pediatrics/Neonatology

CHARACTERISTICS OF TARGET POPULATION

The children and families served by this project receive care within the university's newborn intensive care unit. Over 530 premature or critically ill infants are admitted to the unit each year. Over half the children are Hispanic or Native American.

PROGRAM FOR CHILDREN

The primary goal of this project is to apply an integrated medical/developmental intervention model that maximizes the developmental potential of the parent and infant. Developmental intervention is designed to fit naturally into the medical routine. Training activities, routines, and materials prepared for parents, nurses, and volunteer cuddlers promote optimal development during daily activities such as diapering, feeding, and medical procedures. Specific intervention programs are designed and implemented when needed. The parent's relationship with the infant is defined by direct teaching, modeling, repetition, and positive reinforcement. Parents are encouraged to learn about their children, about services and service systems available, and how to advocate for their children after discharge. Continued infant assessment and support to parents is available.

NEW YORK

DEMONSTRATION GRANT

Grant Title: Young Babies, Young Moms - A Training Program for Adolescent Mothers

Grantee: Cantalician Foundation, Inc.

CHARACTERISTICS OF TARGET POPULATION

This project serves 60 teenage mothers. The mothers must be unfamiliar with child-care community services; have an at-risk, handicapped, or developmentally or physically delayed infant birth to age 36 months; have a definite need to secure information about educational programs for their child; and be economically disadvantaged. The program also addresses the specific issues surrounding developmentally delayed or mentally retarded mothers.

PROGRAM FOR CHILDREN

In the classroom component, classes convene three times weekly and cover topics in education, psychosocial development, health care, and family services. Classes continue for eight months and are followed by home visits for three months.

PROGRAM FOR PARENTS

The curriculum is an expanded version of the Infant Stimulation/Mother Training materials which focus on teaching child development to young mothers and improving the amount and quality of interaction between mother and infant.

The project also helps mothers develop home management, budgetary, and community adaptation skills. The Family Services component of the project uses a curriculum adapted from the Cantalician Center for Learning's Specialized Family Program and the Infant and Toddler Learning Program. Toddlers can attend class three times weekly. A play learning specialist also works with mothers to carry over classroom learning to the home environment.

DEMONSTRATION GRANT

Grant Title:	Special Friends and Computer Project
Grantee:	United Cerebral Palsy Association of Western New York, Inc.

CHARACTERISTICS OF TARGET POPULATION

The project serves approximately 24 motor- and language-impaired preschoolers age three to five years and their parents. Four groups are targeted: (1) severely physically handicapped children of normal intelligence who are non-vocal communicators; (2) severely physically handicapped children of normal intelligence who are vocal communicators; (3) communicating multihandicapped children who function intellectually 1.5 standard deviations or more below the mean of the general population; and (4) verbal learning disabled children who have mild physical handicaps.

PROGRAM FOR CHILDREN

The project uses computer-based learning and play to develop communication, socialization, and school survival skills in the target group. Handicapped children are paired with nonhandicapped children for computer work under the supervision of a staff member or parent in one and one-half hour sessions twice weekly. Software used deals with: pre-academic readiness skills, communication skills, and socialization and play/exploration. Computer hardware is modified to meet the needs of physically handicapped students.

PROGRAM FOR PARENTS

Parents are trained along with staff and work directly with the children under the supervision of project staff members. Training sessions provide an orientation to the project, exposure to software and hardware, introduction to play activities, discussion of follow-up activities, and information regarding the management of children's personal needs and behavior during transportation and at the labs.

DEMONSTRATION GRANT

Grant Title: Television Instruction for Parent Support (TIPS)

Grantee: Young Adult Institute, Inc.

CHARACTERISTICS OF TARGET POPULATION

The project will reach about 500 mentally retarded infants and young children, their parents, and other family members who reside in the New York metropolitan area and Westchester County.

PROGRAM FOR CHILDREN AND PARENTS

Through a project-developed weekly television series, families receive training, counseling, crisis intervention, life planning, information and referral services, and other support services essential to the maintenance of a handicapped child in the community. By providing a cost-effective, comprehensive, coordinated network of support in the most accessible place--the home--the project expects to help avert unnecessary family dissolution and institutional placement of disabled children. A hotline staffed by trained individuals guides parents to appropriate resources. The series will be translated into Spanish and simulcast via radio.

DEMONSTRATION GRANT

Grant Title: Children Who Are Hearing-Impaired in Mainstream Environments (Project CHIME)

Grantee: Board of Cooperative Educational Services (BOCES) of Nassau County

CHARACTERISTICS OF TARGET POPULATION

The project serves six to eight hearing-impaired children age 2 to 5 years who attend the BOCES Program for the Hearing Impaired. Degree of hearing loss ranges from mild to profound.

PROGRAM FOR CHILDREN

Children attend a mainstream program at a demonstration preschool site up to three mornings weekly. The remaining time is spent at the BOCES Hearing Impaired Preschool Program. Length of time for placement varies according to each child's individual education plan (IEP). The project-developed curriculum used in demonstration mainstream sites is an adaptation of traditional nursery school activities. Prototype preschool sites that will serve as demonstration centers include a regular nursery school, a day care center, a mother/child play group, and nursery schools affiliated with religious institutions.

PROGRAM FOR PARENTS

Activities center around training parents to teach their children communication skills at home. Parents of mainstreamed children attend monthly parent education classes which focus on project-related information., Parents of both handicapped and nonhandicapped children can attend workshops and orientation sessions pertaining to the mainstreaming of hearing-impaired children. Parents of handicapped children attend conferences about their children's IEPs and help gather data.

DEMONSTRATION GRANT

Grant Title:	Creating Least Restrictive Options
Grantee:	Syracuse University

CHARACTERISTICS OF TARGET POPULATION

The project serves children who are autistic, emotionally handicapped, or multihandicapped. Children age 1 to 6 years attend the demonstration classroom, and children age 3 to 7 years participate in the consultation component.

PROGRAM FOR CHILDREN

The project operates a model mainstreaming program with six classrooms. Each classroom has a ratio of two nonhandicapped children to one child with special needs. A speech and language therapist works with the children daily. The project helps with placement of children in mainstream classrooms by working with the classroom teacher, providing crisis intervention, and introducing materials on integrated programming for teachers and administrators.

PROGRAM FOR PARENTS

Parents are invited to participate in parent groups and community workshops. Parents may also receive at-home and in-school training and intensive consultation.

NORTH CAROLINA

DEMONSTRATION GRANT

Grant Title:	Helping Agencies Promote Parent Empowerment through Networking (HAPPEN)
Year of Funding:	One
Grantee:	Appalachian State University

CHARACTERISTICS OF TARGET POPULATION

The population served includes the family of any handicapped or at-risk child, birth to age eight years, who requires assistance in the networking of services among different agencies. Twenty to 25 families who reside in a four-county rural area will be served during the first year. Half of these families are economically disadvantaged. Priority is given to minority or underserved children. Special effort is given to assist children and their families in the transition from regional hospital care back to their home communities, and from preschool services to the public schools.

PROGRAM FOR CHILDREN

The project focuses on mediating linkages between families and service providers and between families and informal support networks. Already available services are accessed and networked to meet the individual needs of the child and family. The project includes members of all ecological units (siblings, relatives, friends, church members, community members) as resources that bear on the well-being of the handicapped child.

PROGRAM FOR PARENTS

The project attempts to involve all members of the family. It offers advocacy training, ancillary support (physical, emotional, etc.), communication training, and other services and activities that enhance the parent's ability to ensure the child's needs will be met as linkages develop. Parents also serve on the project's advisory council and help to evaluate the program. The project offers workshops for siblings.

DEMONSTRATION GRANT

Grant Title:	Charlotte Circle Project
Year of Funding:	One
Grantee:	University of North Carolina at Charlotte

CHARACTERISTICS OF TARGET POPULATION

The program serves 7 to 12 children birth to age three years who reside in Mecklenburg County and are severely or profoundly retarded.

PROGRAM FOR CHILDREN

The major goal of the project is to enhance the relationship between parents and their handicapped children by increasing the child's responsiveness, reducing the frequency of stressful behaviors, promoting the acquisition of developmental skills, and providing respite care. Each child spends 17 hours weekly in the center-based program and receives a one-hour weekly home visit. Center-based activities include music, tactile, visual, and auditory stimulation; vocal play; occupational and physical therapy; oral stimulation; therapeutic feeding; language stimulation; toilet training; and reduction of identified interfering behaviors. During the home visit, staff members observe parents conducting specified activities, demonstrate the program to other family members, and help solve problems regarding daily life with a handicapped child.

PROGRAM FOR PARENTS

Parents receive weekly a one-hour home visit, three and one-quarter hours of center-based parent/child training, a one-hour parent support group, and 12 and three-quarters hours released time. Parents spend Friday mornings at the center involved in activities with their children.

DEMONSTRATION GRANT

Grant Title:	First Years Together
Grantee:	Wake County Public School System

CHARACTERISTICS OF TARGET POPULATION

The project serves 30 high-risk infants birth to age 18 months (corrected for prematurity) and their families. Infants are premature, have been hospitalized in a neonatal intensive care unit for at least two weeks, and have not been diagnosed as having cerebral palsy or other serious brain damage. At least half of the children come from low-income families.

PROGRAM FOR CHILDREN

The project follows the Assessment-as-Intervention model. Development is assessed via observations by the parent and a professional; the assessment process becomes an intervention affecting a parent's child-rearing attitudes, beliefs, knowledge, and behavior. A series of ten assessment-intervention sessions are conducted, each followed by a session with a resource specialist who assists parents in planning appropriate parenting strategies for optimizing the child's development and locating materials and community services to implement the plan. The setting for interventions may shift from home to center, according to family preference.

PROGRAM FOR PARENTS

Parents serve as primary intervenors with their children and as evaluators of their own progress and of the overall program. Individual counseling is provided on request and parent support groups are available. The project measures outcomes of parents' attitudes, values, and beliefs about parenting and development; knowledge of infant development; parental control; and psychological well-being. Quality of interactions between parent and child is assessed at 12 and 18 months corrected age.

DEMONSTRATION GRANT

Grant Title: Volunteers in Partnership with Parents (VIPP Project)

Grantee: East Carolina University

CHARACTERISTICS OF TARGET POPULATION

The project serves moderately and severely/profoundly retarded and multihandicapped children birth to age 6 years and their parents. The families live in a poor, rural area.

PROGRAM FOR CHILDREN

The project offers services at home and in the center. Children under age 2 years participate in the home program, with weekly visits from VIPP staff. Children age 2 to 6 years attend the VIPP Project center three days weekly. A combination of a developmental and behaviorally implemented instructional approach is used. The teacher and paraprofessional have primary responsibility for direct intervention with children.

PROGRAM FOR PARENTS

Parents and their volunteer partners receive formal and informal instruction about normal child growth and development, behavior management, cognitively oriented stimulation activities, and caregiving skills. A parent and partner group meets monthly to provide emotional support, along with specific training in skills that foster a handicapped child's development. Individually designed parent-partner plans specify goals and objectives for parents and their partners to accomplish with the children.

DEMONSTRATION GRANT

Grant Title:	Support Network of Rural Intervention Services (SUNRISE)
Year of Funding:	Three
Grantee:	Appalachian State University

CHARACTERISTICS OF TARGET POPULATION

The project serves 40 to 50 mildly to profoundly handicapped children birth to age 6 years and their parents. Handicaps may include mental retardation and speech, hearing, vision, orthopedic, and other health impairments.

PROGRAM FOR CHILDREN

The project operates five center-based parent cooperative preschools in rural western North Carolina. The centers average six children each and are open two half-days weekly, year-round. Parents work in the classrooms as teachers. The classroom program targets appropriate behavior, social interactions, preacademic preparation, independence, and high engagement levels. A major focus is the children's attentional and active engagement with adults, peers, and the physical environment.

PROGRAM FOR PARENTS

Co-op managers teach parents basic child care, intervention, and behavior monitoring routines. These routines are designed to give parents the necessary skills and competencies to function as preschool teachers, to enhance the children's behavior and development; and to measure the children's acquisition of target behaviors. Parents help with management, teaching, keeping records, and maintaining the center. Siblings of the handicapped children attend the co-ops, and special training events are scheduled for parents as needed.

DEMONSTRATION GRANT

Grant Title:	A Social Communicative Intervention Model
Grantee:	Children's Hospital Medical Center

CHARACTERISTICS OF TARGET POPULATION

The project serves term or near-term infants who have suffered from asphyxia with subsequent clinical evidence of hypoxic encephalopathy. Over the course of three years, the project will serve 30 children.

PROGRAM FOR CHILDREN

The three-year curriculum has four phases and attempts to develop competence in social communication. Phase I, Primary Caregiver/Infant Interaction (one hour weekly, increased as needed), focuses on physical readiness for communication and play dialogue. Phase II, Intentional Nonverbal Communication (one hour four times weekly), attempts through individual and group treatments to help the child demonstrate nonverbal communication. Phase III, Initial Verbal (Symbolic) Intervention, attempts to establish a core vocabulary of ten symbols. Phase IV, Expanding Verbal (Symbolic) Skills, focuses on the establishment of multiword combinations.

PROGRAM FOR PARENTS

The project develops individual family plans and tries, through training, to inform families about handicapping conditions and help parents be therapeutic agents, obtain services from outside agencies, and develop skills to cope with the stresses of rearing a handicapped child.

DEMONSTRATION GRANT

Grant Title: **Training and Educational Assistance for Children with Handicaps (TEACH)**

Grantee: **Stark County Board of Mental Retardation and Developmental Disabilities**

CHARACTERISTICS OF TARGET POPULATION

The project serves 95 preschool children birth to age 6 years who have substantial developmental disabilities according to the rules established by the Ohio Department of Mental Retardation and Developmental Disabilities.

PROGRAM FOR CHILDREN

The project provides a comprehensive multidisciplinary program for handicapped preschool children in settings integrated with nonhandicapped peers. Infants and their parents receive one hour of training weekly, focusing on the sensorimotor development of the child. Toddlers attend a half-day integrated program based on the Uzgiris-Hunt Ordinal Scales of Psychological Development. The preschool program operates five days weekly during the regular school year and focuses on the development of skills that are critical to success in a mainstream environment. The children begin the program in self-contained classrooms located in a regular public school. Gradually, students are mainstreamed into existing classes for nonhandicapped children.

PROGRAM FOR PARENTS

Parents of children in the infant or toddler component are required to participate. Daytime respite care for children is provided so that parents can attend weekly workshops and training sessions, including a nine-month series on behavior management, social learning theory, human growth and development, and personal growth and development. Parents of children in the preschool component receive similar services, with the exception of respite care.

DEMONSTRATION GRANT

Grant Title:	Project Access
Grantee:	Cincinnati Center for Developmental Disorders

CHARACTERISTICS OF TARGET POPULATION

The project serves abused and neglected children age 2 to 5 years who are suspected of having developmental disabilities. Each year staff screen 250 children; 100 to 150 children receive in-depth evaluations through local school and grant resources. Children with complicated developmental disabilities receive a comprehensive, longitudinal, multidisciplinary evaluation through referrals to local resources and the University Affiliated Cincinnati Center for Developmental Disorders.

PROGRAM FOR CHILDREN

The project's goal is to develop an interdisciplinary educational intervention program to identify abused and neglected children who are developmentally disabled/learning impaired; develop remedial, individual education plans for these children; and provide access to educational placements to meet individual developmental needs. Most of the children are referred to appropriate community programs. Twenty-four children attend the Diagnostic Preschool where they are evaluated by a multidisciplinary team and receive language therapy and additional therapy as needed. The team reviews diagnostic status and trial treatment results biweekly. Findings are shared with the child welfare agency and parents or foster parents. The project offers local teachers and therapists inservice training on methods and objectives. Staff members visit the child's community placement for consultation and assessment of programs.

PROGRAM FOR PARENTS

During their child's enrollment in the Diagnostic Preschool, parents are offered individual or group social work treatment and behavior management counseling. All parents are counseled on the findings of developmental evaluations and on educational due process and placement procedures.

DEMONSTRATION GRANT

Grant Title:	Remediating Social Deficits in Peer Interactions
Grantee:	The Ohio State University

CHARACTERISTICS OF TARGET POPULATION

The project will develop a model for enhancing peer interaction skills of developmentally delayed children age 3 to 5 years. The project provides services to approximately 24 children, their parents, and teaching staff. Children are selected from existing community programs on the basis of teacher recommendations, parent interviews, and classroom observations.

PROGRAM FOR CHILDREN

Children participate in small playgroups that function as a setting for implementation, evaluation, and refinement of an assessment instrument and an intervention curriculum. The assessment instrument measures the use of appropriate affect, characteristic levels of play, range of communications skills, and specific social processes such as the initiation, maintenance, and termination of peer interactions. The curriculum presents detailed intervention strategies and procedures for matching those strategies to the assessed needs of individual children. Children participate in integrated early education classrooms as part of the intervention process.

PROGRAM FOR PARENTS

Assessment procedures address family interaction patterns, social networks, and overall family functioning. Strategies for expanding and strengthening the child's social network in the family and the community will be developed and implemented. Parents and siblings are encouraged to participate in a series of support group sessions.

OREGON

DEMONSTRATION GRANT

Grant Title:	**Model Early Intervention Program to Develop a Linked Evaluation - Programming System**
Grantee:	**Center on Human Development, University of Oregon**

CHARACTERISTICS OF TARGET POPULATION

The project serves handicapped infants and young children age 15 to 36 months. Each of two center-based classrooms enrolls ten to thirteen handicapped children and four to five nonhandicapped children. The handicapped children demonstrate a range of impairments (mild to severe) and a variety of etiologies. The nonhandicapped children are at risk for medical reasons (by virtue of placement in a newborn intensive care unit) or for environmental reasons (as identified by a county welfare agency), or are siblings of participating handicapped children.

PROGRAM FOR CHILDREN

Children are served in two center-based classrooms for three hours, four days weekly. Infants are served in weekly baby groups which are held at the center and which include their caregivers. The curriculum is based upon a behavioral-developmental philosophical orientation; an activity-based approach to instruction; and a strong linkage between assessment, intervention, and evaluation.

A comprehensive assessment-evaluation system is linked directly to the child's individual educational plan (IEP) and subsequent instructional programming.

PROGRAM FOR PARENTS

The project provides educational and support services to families. Flexible family involvement is emphasized, and participation is encouraged in the development of the IEP and individual family involvement plans. Parent participation in the classroom is encouraged, and support activities and training at home are available. A Parent Survey, a Parent Self-Appraisal Inventory, a Weekly Parent Involvement Activity Log, and a Parent-Satisfaction Questionnaire are used to measure impact on families.

PENNSYLVANIA

DEMONSTRATION GRANT

Grant Title: Helping Achieve Potential of Preschool Youngsters (HAPPY)

Grantee: School District of the City of Allentown

CHARACTERISTICS OF TARGET POPULATION

The project serves mildly handicapped children age 4 to 5 years who have not yet entered school or who are newly enrolled in kindergarten. Handicaps may include learning disabilities, educable mental retardation, developmental and language delays, mild emotional disturbances, and social maladjustments. Services are focused on high-risk students who are culturally different or economically disadvantaged.

PROGRAM FOR CHILDREN

Three classes operate weekdays for two and one-half hours. The program uses developmental and behavioral techniques with a curriculum/assessment linkage model. Objectives are based on needs identified using the criterion-referenced Uniform Performance Assessment Scale (UPAS) and are linked to the HI-COMP Curriculum. The curriculum emphasizes language and cognitive development.

PROGRAM FOR PARENTS

Inservice training for parents is held monthly; transportation and child care are provided. Parents are encouraged to participate in the classroom and to observe classes through two-way mirrors. The project distributes a monthly newsletter for parents and operates a parent drop-in center and a "make-and-take" lending toy library.

DEMONSTRATION GRANT

Grant Title: Rural Kindergarten Identification and Developmental Screening (KIDS)

Grantee: Pennsylvania Department of Education

CHARACTERISTICS OF TARGET POPULATION

Each spring, the project screens all children in an eight-county rural area who will enter kindergarten the following fall. A home-based program serves 44 at-risk children during the summer prior to their entrance into a regular kindergarten class. The project uses a consultant-teacher model to maintain these children in the regular kindergarten class during the school year.

PROGRAM FOR CHILDREN

Children are screened and those suspected of having handicaps are assessed. Forty-four of the children are enrolled in a summer intervention program. At the end of the summer, children are screened again and special learning needs are identified. The project adapts the regular kindergarten curriculum to meet the special needs of each child. All children are mainstreamed into regular kindergarten classes. A follow-up progress assessment is carried out. The summer program is home-based and trains the kindergarten teacher, the parent, and other school personnel to work together to prepare the child for kindergarten.

PROGRAM FOR PARENTS

Parents attend workshops, receive training, actively participate in instructing their at-risk preschoolers, help to develop materials, and evaluate the program.

DEMONSTRATION GRANT

Grant Title: Parent and Toddler Training (PATT)

Grantee: Western Pennsylvania School for Blind Children

CHARACTERISTICS OF TARGET POPULATION

The project serves visually impaired and multihandicapped infants and toddlers birth to age 3 years and their families. The major eligibility criterion is legal blindness or suspected legal blindness as determined through ophthalmologic evaluations. A minimum of 30 families will participate in PATT.

PROGRAM FOR PARENTS AND CHILDREN

Emphasis is placed on teaching parents methods of enhancing optimal social responsiveness from their visually handicapped infants. Parents are trained in the use of specific strategies for effective caregiving, play and infant stimulation techniques, behavior management, and communication and problem-solving skills. The project networks with community-based programs for comprehensive infant services as well as supplementary services for families.

Project PATT offers a 24-week intervention program consisting of weekly two-hour meetings at the center. The program educates the parents about the nature of the child's handicapping condition, its impact on growth and development, and its influence on the family.

The Carey Infant/Toddler Temperament Scale, videotaped behavior observations of parent-infant interactions, and periodic evaluations by a physical therapist and an occupational therapist are used as performance instruments. To assess parent progress, the project uses the Locke-Wallace Marital Satisfaction Scale, the Beck Depression Inventory, the Hopkins Symptoms Checklist, the Questionnaire on Resources and Stress, the Minnesota Multiphasic Personality Inventory, and the Home Observation for Measurement of the Environment Inventory. To measure the progress of siblings, the project uses the Child Behavior Profile and the Youth Self-Report Inventory.

DEMONSTRATION GRANT

Grant Title:	Preparation for Regular Education Placement (PREP)
Grantee:	University of Pittsburgh

CHARACTERISTICS OF TARGET POPULATION

This project provides services to eight children age 3 to 5 years who demonstrate significantly deviant and maladaptive behavior patterns in a wide variety of settings and, as a result, are not expected to benefit from regular kindergarten without preliminary treatment and preparation. The project also serves six nonhandicapped preschoolers.

PROGRAM FOR CHILDREN

PREP offers a classroom-based comprehensive preschool model, integrating behavior-disordered and nonhandicapped children. Individual education plans are developed for both groups of children. The curriculum has three interrelated modules: (1) systematic programming for the reduction of deviant or maladaptive behavior patterns, (2) generic and individualized social and academic survival skills training, and (3) instruction in preacademic and early academic skills. Handicapped children learn social and academic survival skills related to successful placement in regular education settings.

PROGRAM FOR PARENTS

Orientation presentations provide parents with a conceptual understanding of the program's focus and a common vocabulary for further discussion and participation. Parents later are trained in the management of their children's behavior, child advocacy, and participation in the classroom model.

DEMONSTRATION GRANT

Grant Title: Project Link for Neonates at Risk

Grantee: United Cerebral Palsy of Northern Pennsylvania

CHARACTERISTICS OF TARGET POPULATION

The project serves infants who are at-risk for developmental disabilities and their families. All infants served are referred by the staff of the regional neonatal intensive care unit.

PROGRAM FOR CHILDREN

The program uses a transdisciplinary service delivery system in a home-based setting with guidance from an early intervention specialist. Developmental goals are set for each child based on analysis of videotaped behavior samples.

PROGRAM FOR PARENTS

Families are visited twice monthly for an evaluation of their children's developmental progress. Specific recommendations are made for using or changing the child's environment to enhance development, and handling and positioning techniques are demonstrated. Parents receive information on growth and development and are referred to other services as needed. Monthly parent support and education meetings are held.

TENNESSEE

DEMONSTRATION GRANT

Grant Title: Southern Appalachian Early Intervention Program

Year of Funding: One

Grantee: East Tennessee State University

CHARACTERISTICS OF TARGET POPULATION

The project serves moderately to severely handicapped children birth to age three years who reside in the suburban and rural counties of northeast Tennessee.

PROGRAM FOR CHILDREN

The project provides educational services in the on-campus center or at the rural contact centers. Following assessment of the child's needs, the parents and project staff meet to form an Individual Development Plan which includes plans for both center-based and at-home activities. Each child is assigned a project facilitator who coordinates and monitors services received from a transdisciplinary team. Curricula used in the center-based program include the Program Guide for Infants and Young Children. Home-based activities focus on stimulation, movement, sensory-motor activities, and pre-speech activities. Staff members model activities for parents to carry out at home.

PROGRAM FOR PARENTS

Parents participate in the assessment process, the development of an Individual Development Plan, and in the day-to-day implementation of recommended therapeutic interventions. The project offers three levels of parent training. The first stage takes place upon admission to the program and provides support for bridging the child's entry into the program. The second level focuses on techniques and activities which the parent should employ at home. The third level deals with parenting techniques. The project also organizes parent support groups, and includes parents on the advisory council.

DEMONSTRATION GRANT

Grant Title:	Educational Television Intervention Programs for Handicapped Infants, Toddlers, and Families in Rural Communities (ETIPS)
Grantee:	Tennessee Technological University

CHARACTERISTICS OF TARGET POPULATION

The project serves 25 children age 6 to 24 months and their parents or caregivers who live in rural, isolated areas. Twenty of the children are handicapped; five are at-risk.

PROGRAM FOR CHILDREN

The project is developing, testing, implementing, and evaluating 30 15-minute instructional television programs to help parents and other adults identify, facilitate, and monitor the progress of their handicapped infants and toddlers. The programs focus on motor-adaptive skills and cognitive/language skills. Several existing assessment/intervention instruments, including the Peabody Developmental Motor Scales and Activity Cards, the Uzgiris-Hunt Ordinal Scales of Psychological Development, and the Portage Guide to Early Education are used as a basis for the content of the programs. Parent packets and guides accompany each broadcast. The project also fosters positive attitudes related to mainstreaming.

PROGRAM FOR PARENTS

Staff members contact parents weekly. Parent groups meet monthly to provide support and motivation. Parents document their own progress by using check sheets which accompany each broadcast. Staff members observe parents at home and help them work with their children.

DEMONSTRATION GRANT

Grant Title:	Preschool Orientation and Mobility Project
Grantee:	Vanderbilt University

CHARACTERISTICS OF TARGET POPULATION

The project serves visually impaired and/or handicapped children birth to age 5 years and their parents. Visual impairment is difficult to ascertain in extremely young children. Therefore, the project also serves children suspected of having severe visual problems.

PROGRAM FOR CHILDREN

The project identifies and integrates orientation and mobility (O&M) skills with early intervention services. The curriculum covers developmental areas of cognition, language, motor skills, socialization, and self-help, with an emphasis on the development and integration of age-appropriate O&M skills (movement, posture, concept of space, and perceptual motor functioning). A four-day classroom program is provided for children age 2 to 5 years, and home visits are made bimonthly. For children birth to age 5 years, home-based parent training is available. Each parent and child receives a weekly home visit of one and one-half hours. Group experiences are provided bimonthly. The project also operates a monthly Resource Center Clinic, which provides assessment and parent consultation services for visually impaired preschoolers, their families, and teachers.

PROGRAM FOR PARENTS

Parents develop their own parent education plan (PEP). Based on the PEPs, project staff plan individual and group parent training sessions, facilitate the development of parent support groups, and help parents obtain ancillary support services.

DEMONSTRATION GRANT

Grant Title:	Infant/Toddler Learning Project
Grantee:	Peabody College, Vanderbilt University

CHARACTERISTICS OF TARGET POPULATION

The project serves severely handicapped infants birth to age 3 years. To be eligible for the program, the child's developmental status must be at a level below age 15 months as indicated by standardized infant assessments. Preference is given to neurologically impaired children and children with multiple handicaps.

PROGRAM FOR CHILDREN

The center-based program is based on the principles of environmental design and demonstrates a transdisciplinary approach. Microcomputer technology helps staff members make decisions, plan curricula, prepare individual education plans (IEP), and collect and analyze data. The curriculum embodies the concepts and practices associated with incidental teaching and the Individualized Curriculum Sequencing model.

PROGRAM FOR PARENTS

The program for parents is based on the needs and dynamics of each family situation. Support services include: home visits by project staff, management and treatment skills, environmental arrangement in the home, stress and time management, identification of support networks, support groups, classroom participation, and other services.

TEXAS

DEMONSTRATION GRANT

Grant Title:	Single Parent Project
Grantee:	Infant Programs, Houston, Texas

CHARACTERISTICS OF TARGET POPULATION

The project serves developmentally delayed children birth to age 3 years from single-parent families. Parent eligibility is based on parents' economic and social stress levels. The project serves 15 children and their parents.

PROGRAM FOR CHILDREN

The format and frequency of services to children vary according to parental and child needs. Available services include home visits and center-based and group classes at least once weekly. The class focuses on helping the parent become involved with the child at the parent's individual level of readiness. Teacher models appropriate nurturing, positioning and handling, and teaching techniques using the Infant Programs Birth-to-Three Curriculum and the Carolina Curriculum for 0-2.

UTAH

DEMONSTRATION GRANT

Grant Title: Functional Mainstreaming for Success

Grantee: Developmental Center for Handicapped Persons
Utah State University

CHARACTERISTICS OF TARGET POPULATION

The project serves about 30 moderately to severely handicapped children age 3 to 6 years. The children have a variety of handicapping conditions including mental retardation, emotional disturbance, behavior disorder, developmental delay, and sensory and motor impairments.

PROGRAM FOR CHILDREN

The project provides instructional and social mainstreaming of handicapped children with 60 nonhandicapped peers. Procedures are developed to (1) identify teacher expectations, child training needs, and teacher assistance and support needs before and during mainstreaming; (2) determine the integration activities appropriate for each child; (3) provide activities for functional grouping of handicapped and nonhandicapped peers; and (4) prepare children, families, and staff for mainstreaming. The project has operated three preschool classrooms with a 50:50 ratio of handicapped and nonhandicapped children. Other mainstreaming activities include reverse mainstreaming and buddy systems in preschool, kindergarten, and first grade classrooms.

PROGRAM FOR PARENTS

The project has developed materials that address school policies, myths and realities of handicapping conditions, and the legal and educational rationale for mainstreaming. Parent satisfaction is measured biannually. Parents help develop individual education plans, advocate for their child, and facilitate generalization of skills.

DEMONSTRATION GRANT

Grant Title: H1 TECH

Grantee: Developmental Center for Handicapped Persons
Utah State University

CHARACTERISTICS OF TARGET POPULATION

The project will serve approximately 45 children age 2 to 6 years who meet eligibility criteria for developmental disabilities and who have no physical and/or sensory impairments that would prevent their participation in an integrated preschool. All children have mild to severe impairments in cognitive functioning and other areas.

PROGRAM FOR CHILDREN

Mainstream and center-based programs are the primary demonstration sites. The initial demonstration site serves approximately 20 nonhandicapped and five handicapped children. Handicapped children are integrated into regularly scheduled activities supplemented with microsessions and co-incidental teaching sessions. Individual education plans are developed using CAMS (Curriculum and Monitoring System). Ongoing training, program monitoring, and follow-up for preschools in rural areas are conducted using a combination of telecommunication modes.

PROGRAM FOR PARENTS

Parents are involved in parent training programs, volunteer assistance (such as the Advisory Committee) in-home assistance, and child advocacy.

DEMONSTRATION GRANT

Grant Title: Preschool Transition Project (PTP)

Grantee: Developmental Centers for Handicapped Persons
Utah State University

CHARACTERISTICS OF TARGET POPULATION

The project serves handicapped children age 4 to 5 years who are eligible for school placement the following school year and who demonstrate a mental age delay of at least one year and a year or more delay in at least one skill area, such as language or self-care. Approximately 25 children will be served.

PROGRAM FOR CHILDREN

The purpose of the project is to develop a model to prepare handicapped children for successful mainstreaming at the kindergarten and elementary levels. The model has four components: (1) child preparation, which occurs in a mainstream preschool and develops children's learning strategies, social skills, and academic skills in formats that approximate kindergarten and elementary school; (2) information transfer, which facilitates administrative transfer of records; (3) placement, which teaches parents to act as advocates to secure mainstream placements; and (4) follow-up, which ensures that the mainstream teachers receive support, training, and pertinent information about the mainstreamed child.

PROGRAM FOR PARENTS

In addition to development of individual education plans (IEP), parents of children in the transition program are involved in teaching social skills to their children at home, and acting as transition agents. The Let's Be Social at Home program is used in training parents to teach social skills. Meetings are held to inform parents about the transition process and to teach them how to be advocates for their children.

VERMONT

DEMONSTRATION GRANT

Grant Title:	Transitioning from Early Education Into the Elementary School Mainstream
Grantee:	University of Vermont

CHARACTERISTICS OF TARGET POPULATION

The project is designed to provide training and technical assistance to public school personnel providing educational services to handicapped preschoolers in 18 rural elementary schools. These personnel include Essential Early Education (EEE), kindergarten, and first grade teachers; elementary special education staff; and administrators.

PROGRAM*

The goal of the project is to assist local elementary schools in establishing and implementing procedures for transitioning young children with handicaps from EEE programs into the local elementary school mainstream. In order to accomplish this goal, the project is involved in two sets of activities: (1) developing a model for transitioning that can be incorporated into the local elementary school system; and (2) providing training and technical assistance to the public school personnel to enable them to adapt and adopt this model. The transition model includes preparation of the child and the local elementary school for transitioning and a system for monitoring and remediating the child's participation in the elementary school mainstream. The project's training and technical assistance activities are designed to promote involvement of all elementary school personnel, development of administrative policies and procedures, and establishment of a cooperative transition planning team. Parents are involved as members of the transition planning team and are provided opportunities for participating in the development and implementation of their child's transition plan.

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* The project does not work directly with children or parents.

VIRGINIA

DEMONSTRATION GRANT

Grant Title:	Parent-to-Parent Monitoring Project
Year of Funding:	Two
Grantee:	Virginia Commonwealth University

CHARACTERISTICS OF TARGET POPULATION

The project serves infants birth to age 2 years who have received care in the local neonatal intensive care unit, infants whose mothers were under age 17 years at the infant's birth, and infants whose mothers have limited abilities (MH-MR). About 300 infants and families are eligible for services; 150 will participate each year.

PROGRAM FOR CHILDREN

The project serves children indirectly through a comprehensive program of services to families. Parents may choose to participate in any or all of the components. The first component monitors at-risk infants. A staff member visits the home of an at-risk infant to provide developmental and community resource information to parents immediately after their newborn is discharged from the hospital. Visits occur every four months until the infant is age 2 years. The second component is a bimonthly parent-baby group offering education and support to parents of at-risk and delayed infants. In the third component, a small cadre of parents is trained to implement the first two components.

PROGRAM FOR PARENTS

Effectiveness of services to parents is documented by a parents' need inventory, stress and support scales (A.F.I.L.E. and F.I.R.M.), parents' knowledge of child development, parent satisfaction measures, the Home Observation for Measurement of the Environment, Field's Face-to-Face Interaction Scales, the Broussary Neonatal Perception Inventory, and the Nowicki-Strickland Locus of Control. Other formative measures are used with parents participating in Components 2 and 3.

DEMONSTRATION GRANT

Grant Title:	Bright Beginnings
Year of Funding:	Three
Grantee:	Williamsburg - James City County Public School/Child Development Resources

CHARACTERISTICS OF TARGET POPULATION

The project serves about 80 children birth to age 5 years who are at risk for school failure. Risk factors are compiled based on a family need assessment and other appropriate assessments. Staff members then determine, based on risk factors, the category of services that the child and family receive.

PROGRAM FOR CHILDREN

Children in Category I are referred to appropriate community resources, may receive developmental monitoring in other placements, and are rescreened every three to six months. Children and their families in Categories II and III may participate in Sharing Centers, home visits, parent education groups, and language groups. In Category III, children birth to age 2 years receive weekly home visits. Children age 2 to 5 years may attend a transition classroom three times weekly. The classroom uses the High Scope Curriculum and the Developmental Language Approach. Activities which foster positive interactions between parent and child are stressed at home visits and in the Sharing Center.

PROGRAM FOR PARENTS

An individual family plan is developed by parents and project staff. Parents sign an agreement as part of the enrollment process and must participate in Sharing Centers. Parents must participate in the classroom and may serve on the advisory council.

DEMONSTRATION GRANT

Grant Title:	Project COPE
Year of Funding:	Three
Grantee:	The Children's Center, Franklin, VA

CHARACTERISTICS OF TARGET POPULATION

The project serves 20 developmentally disabled or chronically ill infants birth to age 2 years and 10 chronically ill children age 3 to 8 years. Sixty percent of the children are from low-income families; 50 percent live in sparsely populated rural areas; 23 percent of the mothers are teenagers; and 50 percent of the infants served represent racial minority groups.

PROGRAM FOR CHILDREN

A combination of home- and center-based services is provided. Parents who so choose have the option of placing their child in a mainstream child-care center. Activities include supervised free play, crafts, movement, singing, story telling, and outside play. Inservice training and technical assistance are provided to teachers of the school-aged children.

PROGRAM FOR PARENTS

Project staff members encourage parents to observe their children's interactions with other children. Center-based respite care is available to parents. Parents attend weekly training sessions where the case manager introduces new activities and discusses the child's interactions at the center. Parent satisfaction is measured by questionnaires.

WASHINGTON

DEMONSTRATION GRANT

Grant Title:	Coordinated Service Delivery for Young Handicapped Children
Grantee:	Experienced Education Unit, University of Washington

CHARACTERISTICS OF TARGET POPULATION

The procedures developed by the project can be used by agencies serving children of all ages and types of handicap and their families. Children eligible to participate in the demonstration phase of the project are those who are enrolled in the participating agencies and are scheduled for transition or receiving concurrent services.

PROGRAM FOR CHILDREN

The goal of the project is the development and Statewide implementation of model procedures that will promote coordinated service delivery to preschool handicapped children by child service agencies and school districts. The project is developing, field testing, and evaluating step-by-step, low-cost procedures and training materials that will help coordinate education, health, and social services. All materials will be field tested in several sites.

PROGRAM FOR PARENTS

The project will measure and document (1) the impact of each objective in terms of quality, time, and cost; (2) the satisfaction of those using project materials or products; (3) implementation of specific activities; and (4) the cost of implementing model procedures. Project staff members will develop an early childhood interagency transition model, a concurrent services model, and training materials to accompany both models.

WEST VIRGINIA

DEMONSTRATION GRANT

Grant Title:	Intensive Team Training
Grantee:	Marshall University

CHARACTERISTICS OF TARGET POPULATION

The project serves autistic or autistic-like children age two to six years and their families who reside in rural communities in West Virginia.

PROGRAM FOR CHILDREN

The project trains teams of people who are responsible for carrying out educational interventions. The teams consist of the child, the parents/guardians, and relevant others such as preschool teachers, daycare providers, relatives, and LEA personnel. Intervention programs are carried out under the guidance of project staff.

After assessment, the project trainer and team develop an individualized training plan (ITP) designed to meet the idiosyncratic needs of the child and family. Following the initial training period, intervention programs are conducted in the home or school as appropriate. The project maintains involvement with the team throughout the preschool years until a smooth and complete transition to the LEA has been achieved. During this period, project staff maintain regular contact including a minimum of monthly telephone contacts, quarterly home visits, and bi-annual reevaluations of progress.

PROGRAM FOR PARENTS

Adults on the team receive training in generalized behavior management and instructional techniques. Through discussion, modeling, actual feedback, videotaped feedback, and print materials, trainees acquire skills in using instructional delivery techniques, question aiding, prompting, shaping and chaining, and providing reinforcement. The project also provides advanced individualized training for specific needs identified on the ITP. The progress of adult participants is evaluated directly through video-recordings of adult-child interactions. Parents and participating professionals also complete satisfaction questionnaires.

DEMONSTRATION GRANT

Grant Title:	"PEPSI" - A Model Service Program for High-Risk and Handicapped Infants
Grantee:	Summit Center for Human Development Clarksburg, West Virginia

CHARACTERISTICS OF TARGET POPULATION

The project serves children birth to age 3 years who are at-risk or have developmental disabilities because of developmental, socioeconomic, environmental, and psychological factors.

PROGRAM FOR CHILDREN

The project screens for handicapping an high-risk conditions during prenatal, neonatal, and postnatal visits with the family doctor. Children at risk for developmental or psychological problems, or parents with psychological problems, may enter the project's direct-service component. Individual education plans are written for each child and parent. Parents bring their children to the center for one-hour sessions one to four times monthly where staff members show parents tasks to carry out at home. Parents work with their children for five to ten minutes daily on each task. The Early Learning Accomplishment Profile is used as a guide for the curriculum the project is developing. The project also provides follow-up services for children who complete the direct service component of the program.

PROGRAM FOR PARENTS

The curriculum for correcting aberrant socioemotional patterns and facilitating bonding and appropriate parenting uses much the same approach as does the program for children. Parents are given method cards and instructions on discriminating infant interaction cues in the areas of attentiveness, emotion, responsiveness, and task engagement.

WISCONSIN

DEMONSTRATION GRANT

Grant Title:	The Portage Project
Grantee:	Cooperative Education Agency, Portage, Wisconsin

PROGRAM FOR CHILDREN

The Portage Project is a structured, data-based, individualized home teaching program serving multicategorical handicapped children birth to age 6 years. A home teacher helps parents assess their child's skills in five developmental areas, target emerging skills, define appropriate teaching techniques, and evaluate the child's performance. One-to-one interaction promotes full family participation and individualization of instructional goals. A combination classroom/home-based option is offered for children preparing to enter kindergarten.

A Description of Early Childhood Discretionary Outreach Grants

ARKANSAS

OUTREACH GRANT

Grant Title: The Focus Outreach Model

Grantee: Focus, Inc.

MAJOR OUTREACH GOALS

To provide long-term training with extensive on-site follow-up to special education early childhood programs in Arkansas, western Tennessee, and southern Missouri. The core of this training program is the Focus communication curriculum, which emphasizes the following:

1. Teaching functional communication skills during every activity throughout the day
2. Working with small groups of children while programming for each individual within the group
3. Teaching communication skills during informal activities by following the child's leads and expanding his/her attempts to communicate
4. Attending to and reinforcing every attempt of the child to communicate
5. Always offering the child choices during all activities
6. Providing natural consequences to communications efforts.

MAJOR OUTREACH SERVICES

To train teachers of young children to implement this approach appropriately, the training must be intensive and sequential. Therefore, the Focus Outreach project does not seek a nationwide dissemination effort even though materials have been distributed in 19 states and 4 counties. Rather the purpose of this Outreach project is to train paraprofessionals working in rural Arkansas. The Focus staff has consulted closely with the Arkansas DDS to identify training sites, and DDS assists the Outreach project by sharing the results of the Statewide needs assessment and by co-sponsoring an annual early childhood conference.

A second component of the Focus Outreach model is based on the current Maternal & Child Health Project. Several centers within the State have identified training for special needs parents as a major concern. The materials developed by the staff of the Focus MCH project will be distributed as part of the Outreach training project.

COLORADO

OUTREACH GRANT

Grant Title: INREAL Outreach Program

Grantee: University of Colorado Health Science Center

MAJOR OUTREACH GOALS

A Comprehensive INREAL/Outreach Plan piloted in 1983-84 began to develop and support cost-effective INREAL/Outreach Regional Training Centers. Six Regional Centers are currently in operation. The goal of the proposed outreach activities for 1986-87 is to extend the impact of the INREAL/Outreach Comprehensive Plan throughout the Regional Training Center Network. More high-quality, self-supporting INREAL/Outreach Regional Training Centers will be developed and established nationally. The objectives for the proposed funding period, 1986-87 are to: (1) develop three new Regional Training Centers; (2) Expand the six existing Regional Training Centers and (3) stimulate the development of three future Regional Training Centers. These objectives will be met by providing appropriate outreach services addressing the following priorities: (1) cooperative efforts with state agencies, (2) providing services to handicapped infants and toddlers from birth to three years old, (3) providing services to unserved and underserved handicapped children three to eight years old, (4) serving parent/family and day care providers and (5) identifying health care professionals. It is projected that new funding will impact 102,280 handicapped children and their families. The projected impact on children is provided for each objective by priority.

MAJOR OUTREACH SERVICES

OBJECTIVE I - Development of Three New INREAL Regional Training Centers

OBJECTIVE II - Expansion of Six Existing INREAL Regional Training Centers

OBJECTIVE III - Stimulation of Three Future INREAL Regional Training Centers

OUTREACH GRANT

Grant Title: Rutland Center Developmental Therapy Model

Grantee: University of Georgia

MAJOR OUTREACH GOALS

- To stimulate growth of specialized, high-quality services to seriously emotionally disturbed and other handicapped children age 2 to 8 years and their parents and teachers.
- To offer technical assistance to target audiences to facilitate the use of the Rutland Center Developmental Therapy Model.

MAJOR OUTREACH SERVICES

The project assists in program planning and design, staff development, and providing identification and referral processes, intake and diagnostics, Developmental Therapy Curriculum, school liaison and parent services, and staff evaluation. The project also disseminates information and helps establish effective evaluation systems. Technical assistance is provided through needs assessment planning, workshops, and on-site visits. The project conducts two- to five-day training sessions for teachers, administrators, paraprofessionals, and parents at the center or at regional locations. Two to four on-site visits are made to replication sites throughout the year. Special topic workshops, conducted upon request, provide additional training to sites or other interested persons.

ILLINOIS

OUTREACH GRANT

Grant Title:	The PEECH Model
Grantee:	University of Illinois, Urbana, IL

MAJOR OUTREACH GOALS

Consists of 20 interwoven components which can be broken down into five major categories: (1) screening and identification, (2) ongoing assessment, (3) linking assessment with programming, (4) parent involvement, and (5) evaluation. Procedures and instruments have been developed to identify and assess young handicapped children and link the stage of development of these children in critical areas with appropriate programming in the classroom and at home. The philosophy of the model encourages an eclectic and positive approach to child management emphasizing the promotion of affective, cognitive/language, and motoric development of handicapped children. The PEECH curriculum has a central focus of language development and is designed to meet the specific needs of the preschool handicapped child. Procedures for developing and implementing an individualized and differentiated curriculum are central to the PEECH approach; thus, precise delineation of strengths and weaknesses is a major characteristic of the PEECH approach. Procedures for involving parents in all aspects of their child's educational program are an integral part of the PEECH Project. The PEECH approach results in significant child progress in the areas of cognitive, language, and social skills.

MAJOR OUTREACH SERVICES

One key feature of this Outreach Project is the utilization of Replication Specialists who have been trained in the PEECH Model and are residing in various States across the country. Replication Specialists are employed to provide technical assistance to sites in their vicinity. They are responsible for conducting awareness workshops in their region, assisting in the selection of sites, and providing outreach services. This plan entails a limited Central Staff, thus reducing transportation, lodging, and other expenses incurred when Replication Specialists reside in the Champaign/Urbana area and travel to replication sites.

A second feature is the utilization of university professors in teacher training programs across the country to create an awareness of PEECH. At no cost to the project, ten university professors have agreed to incorporate information on the PEECH Model in their teacher training classes. Both of these delivery systems of technical assistance have proven to be significantly cost effective.

MASSACHUSETTS

OUTREACH GRANT

Grant Title: OPTIMUS/Outreach

Grantee: South Shore Mental Health Center, Inc.

MAJOR OUTREACH GOALS

- To provide quality services to handicapped children birth to age 5 years and their families.
- To train administrators and direct service personnel in the transdisiciplinary model.
- To provide training and technical assistance in the transagency approach to coordination of services from multiple community agencies.
- To disseminate information about the transdisciplinary delivery model and transagency approach to service coordination.

MAJOR OUTREACH SERVICES

Workshops, replication services, technical assistance, on-going panel presentations, and materials development constitute the major portion of the project's training efforts.

OUTREACH GRANT

Grant Title: BEACON Outreach Program

Grantee: Early Recognition Intervention Network, Inc.

MAJOR OUTREACH GOALS

- To promote bilingual services for young handicapped children.
- To train teachers/specialists to use bilingual Preschool Screening System adaptations.

- To train teachers to stimulate skills and concepts using a combination of English and native language materials.
- To involve bilingual parents in understanding and supporting their child's education, through home teaching and generalized awareness.
- To assist the local coordinator in carrying out and extending training.
- To develop and disseminate screening and curriculum materials.

MAJOR OUTREACH SERVICES

BEACON staff provides two to five days of training for replication sites, including workshops, in-class visits, and meetings with administrators. Model classrooms and specialists in the Boston area demonstrate the model. Bilingual screening and curriculum materials are disseminated through contact with bilingual, special education, early childhood and National Diffusion Network personnel in State governments, LEA's, and other interested agencies.

NEW MEXICO

OUTREACH GRANT

Grant Title: Albuquerque Integration Model (AIM)

MAJOR OUTREACH GOALS

The Albuquerque Integration Model (AIM) serves handicapped and nonhandicapped children age 2 to 5 years in integrated classrooms. Educators are cross-trained in the use of diagnostic and cognitive-developmental approaches. Assessments include the Learning Accomplishment Profile, the Westby Symbolic Play Scale, the Alpern-Boll, the Criteria Checklist (developed by the project), and various language and motor instruments.

Major goals include:

- To stimulate high-quality mainstream programs for young handicapped children and their families in rural and urban New Mexico.
- To promote State involvement in programs for handicapped preschoolers.
- To increase awareness of the advantages of mainstreaming.
- To develop and disseminate products on mainstreaming.

MAJOR OUTREACH SERVICES

The project conducts awareness activities, develops and disseminates products, provides consultation and technical assistance, trains professionals, and promotes adaptation of the model at other sites.

NEW YORK

OUTREACH GRANT

Grant Title: A Regional Program for Preschool Handicapped Children

Grantee: Putnam/Northern Westchester Board of Cooperative Educational Services

MAJOR OUTREACH GOALS

- To provide training and technical assistance to programs interested in adopting the Regional Program model or components.
- To coordinate training with State planning agencies.
- To exchange information and materials with other projects and agencies.
- To prepare trainers from demonstration sites to train target staff.

MAJOR OUTREACH SERVICES

The project offers and evaluates awareness workshops, needs assessments for individual agencies, and specific training in model components (Parent Involvement, Transdisciplinary Model, and Interactive Teaching).

OUTREACH GRANT

Grant Title: Facilitative Environments Encouraging Development (FEED)

Grantee: Local school districts

MAJOR OUTREACH GOALS

- To establish new projects in New York City and consult with other interested communities.

MAJOR OUTREACH SERVICES

Staff members consult with other projects, develop programs, and locate practicum sites (hospitals, preschool handicapped centers, preschools serving the nonhandicapped, day care).

OREGON

OUTREACH GRANT

Grant Title: Teaching Research Infant and Child Center Data-Based Classroom

Grantee: Oregon State System of Higher Education
Teaching Research Division

MAJOR OUTREACH GOALS

- To stimulate quality replications of the model's key components.

DESCRIPTION OF DEMONSTRATION MODEL

The project is a classroom-based behavioral program serving children age 2 to 8 years with a variety of handicaps, including Down's Syndrome, cerebral palsy, mental retardation, speech delay, and risk conditions. The program emphasizes individual instruction, trial-by-trial data collection, and the use of trained volunteers as instructors. The Teaching Research Placement Test is the key assessment instrument used to place children into the Teaching Research Curriculum for Moderately and Severely Handicapped. The format of the curriculum is developmental and task analyzed.

MAJOR OUTREACH SERVICES

The project offers five days of training at the demonstration center at the Teaching Research Division. Two follow-up, technical assistance visits are provided to each replication site. The project also conducts awareness workshops.

The project offers practicum-based training in a Teaching Research demonstration classroom with supervision and feedback provided by project staff. Ongoing evaluation is provided to trainees before, during, and after training, and at the time of follow-up. Project staff members have produced the following publications: Training in the Teaching Research Data Based Classroom Model (available only with training); The Data Based Classroom for Moderately and Severely Handicapped; and Teaching Research Curriculum (volumes include Language, Self-Help, Cognitive, Gross and Fine Motor). Staff members are available to provide both general awareness presentations and in-depth workshops on model components.

PENNSYLVANIA

OUTREACH GRANT

Grant Title:	Family Centered Resource Project
Grantee:	Pennsylvania Department of Education

MAJOR OUTREACH GOALS

- To increase and enhance services to preschool handicapped children in Pennsylvania and the Nation through awareness training and replication of the model.
- To train preschool personnel in the three components of the model.
- To develop and disseminate resource materials for preschool personnel.

MAJOR OUTREACH SERVICES

The project provides needs assessments, replication training, follow-up site visits, individualized technical assistance, one-day awareness workshops, site visits, participatory conferences, keynote addresses, and college courses.

TENNESSEE

OUTREACH GRANT

Grant Title: Cognitive Education Project

Grantee: Vanderbilt University

MAJOR OUTREACH GOALS

- To provide training, consultation, technical assistance, and materials to preschool programs that implement the Cognitive Education Model.
- To develop and implement an effective outreach model.
- To evaluate the effectiveness of the Cognitive Education approach in terms of influence on children's general development and educability.
- To improve parents' role in their children's development.

MAJOR OUTREACH SERVICES

The project disseminates information and provides awareness workshops. For programs selected as replication sites, the project provides consultation, technical assistance, training, and curriculum and didactic materials.

UTAH

OUTREACH GRANT

Grant Title: Multi-Agency Project for Preschoolers (MAPPS)

Grantee: Developmental Center for Handicapped Persons
Utah State University

MAJOR OUTREACH GOALS

- To promote coordination of State services to preschool children.
- To develop and disseminate products.
- To train service providers to improve the quality of services.
- To stimulate establishment of services in underserved areas.

MAJOR OUTREACH SERVICES

The project provides training in the use of the Curriculum and Modeling Systems (CAMS) program, and in the areas of cognitive skills, receptive and expressive language, motor skills, self-help skills, and social-emotional development. The project also provides technical assistance in program evaluation.

The project is a home-and community-based intervention program serving delayed children birth to age 5 years in rural and remote areas where there are few professionals trained to work with delayed children. The program teaches parents of delayed children birth to age 3 years to act as intervention agents for their children. For delayed children age 3 to 5 years, the program provides curriculum materials and training to parents and teacher in existing preschools and community day-care programs.

OUTREACH GRANT

Grant Title: INSITE Outreach

Grantee: Department of Communicative Disorders
Utah State University

MAJOR OUTREACH GOALS

To help agencies provide high-quality home intervention services for underserved and unserved multihandicapped sensory-impaired preschoolers.

MAJOR OUTREACH SERVICES

Project staff offer awareness activities, conduct conferences, develop curricular materials, train, disseminate information, offer on-site technical assistance, and evaluate programs through a Nationwide data bank.

Project INSITE conducts two on-site workshops for each adoption site and training parent advisors, administrators, and support personnel in the curriculum and service delivery. A pre-training planning and assistance conference with local site staff takes place the day before the first training workshop. A post-training consultation, review, and next-steps planning conference is conducted onsite at the second workshop. The project has four curriculum manuals, one for each program component. A fifth manual covers the Intervention Program of direct daily service to the multihandicapped child and respite for the parents, which can be initiated as part of INSITE services. In addition, the project has a handbook on developing sign communication with the multihandicapped sensory-impaired child. The project has eight Statewide and nine regional adoptions.

VIRGINIA

OUTREACH GRANT

Grant Title:	Hampton University Mainstreaming Outreach Services
Grantee:	Hampton University

MAJOR OUTREACH GOALS

- To assist target agencies in replicating the model.
- To prepare and disseminate awareness, instructional, and training products.
- To maximize use of existing services by coordinating with local, regional, and National groups.
- To increase awareness of model components and outreach services.

MAJOR OUTREACH SERVICES

The project serves local school division, Head Start programs, social service and community agencies, pediatricians, and day-care centers. Training specialists help sites assess needs and provide appropriate training program (workshops, classroom demonstrations, on-site consultations, summer institutes, courses for college or continuing education credit, and practicum experiences). Classes on mainstreaming young handicapped children are taught throughout the State. Project staff are involved in the Virginia Early Intervention Network, Virginia Association for First Chance Projects, Virginia Division for Early Childhood, and Virginia Action for Prevention, and local, regional, and State agencies. Recent collaborative efforts include development of Virginia SEA/Head Start Collaborative Agreement and Hampton Foster Parent Training.

OUTREACH GRANT

Grant Title:	Child Development Resources (CDR Outreach)
Grantee:	Child Development Resources, Lightfoot, VA

MAJOR OUTREACH GOALS

- To assist State agencies developing and/or refining early childhood State plans, using an interagency/interdisciplinary, collaborative process.
- To assist agencies beginning early intervention programs in the adoption/replication of the CDR Parent-Infant Program or its components.
- To assist established early intervention programs interested in program/staff development through competency-based training.

MAJOR OUTREACH SERVICES

Provide training and technical assistance to pilot sites to improve/refine their services. These sites serve approximately 200 handicapped infants in 33 rural counties and urban areas in Virginia.

Services in Maryland and Washington, D.C. will explore the implementation of the Process Model for Developing Early Intervention Program Guidelines with appropriate personnel at the SEA and will provide training to target sites for replication of CDR Model. Approximately 300 children served.

WASHINGTON

OUTREACH GRANT

Grant Title: Northwest Center Child Development Program

Grantee: Northwest Center, Seattle, WA

MAJOR OUTREACH GOALS

- To disseminate information about the model to other programs.
- To replicate components of the model.
- To help program staff of replication sites coordinate services to children jointly served by two or more agencies.
- To train early childhood program staff to provide services to children in mainstream and integrated environments.
- To train child care providers in home- and center-based programs.

MAJOR OUTREACH SERVICES

The project conducts presentations to organizations, public schools, and agencies. Project staff provide direct training and evaluation assistance to programs replicating components of the model. Staff also consult with community college programs where early childhood personnel are being trained. Dissemination of project-developed materials is a major service.

The center- and home-based programs serve children birth to age 5 years and their families. Children may be multihandicapped or mildly delayed in one skill area. The center-based program is completely integrated (65 nonhandicapped children and 40 handicapped children). Educational programming, therapies, family involvement, health services, and a nutrition component are provided. Child progress is measured by standardized and criteria-referenced developmental checklists. Family involvement is systematically tracked and evaluated, based on the individual plans designed by families.

OUTREACH GRANT

Grant Title: Model Preschool Outreach Project

Grantee: Experimental Education Unit, University of Washington

MAJOR OUTREACH GOALS

- To provide training and other assistance to programs.
- To prepare and disseminate materials to programs and individuals.
- To promote awareness and stimulate improved services.

The project conducts two programs for children. The Program for Children with Down's Syndrome and Other Developmental Delays is designed to accelerate and maintain children's gains in fine- and gross-motor, self-help, social, communication, and cognitive areas. The Communication Program uses systematic instructional programming in communication and language to modify the deficiencies identified in assessment and by observation in the classroom. Children in the Down's Syndrome program are assessed twice yearly with the Developmental Sequence Performance Inventory. The Communication Program uses the Sequenced Inventory of Communication Development, the Peabody Picture Vocabulary Test (revised), pre/post language samples, and (when appropriate) the Preschool Profile.

MAJOR OUTREACH SERVICES

The project offers field-based and center-based training, technical assistance, instructional and informational materials, and follow-up assistance as requested.

The program has demonstrated that it can work effectively with communication-delayed children and those with Down's Syndrome and other developmental delays. Parent involvement techniques maximize child gains as parents and other members of the interdisciplinary team coordinate efforts at home and at school.

OUTREACH GRANT

Grant Title: Fathers Program Outreach

Grantee: Experimental Education Unit, University of Washington

MAJOR OUTREACH GOALS

- To increase awareness of the needs of fathers and their handicapped children.
- To develop and disseminate a National newsletter on father involvement.
- To provide demonstration, training, and technical assistance to programs and agencies wishing to add a program for fathers to their existing matrix of services.
- To evaluate program effectiveness in outreach sites.

MAJOR OUTREACH SERVICES

Project staff provide training in how to plan, organize, and produce programs for fathers of children with special needs. Demonstration and training are available to help staff stimulate and guide group discussions with fathers. Staff also conduct "Fathers Only" workshops at major regional and National parent conferences. Technical assistance is provided to programs beginning or expanding a Fathers Program.

OUTREACH GRANT

Grant Title: ECHI Outreach Project

Grantee: Experimental Education Unit, University of Washington

MAJOR OUTREACH GOALS

- To provide and/or improve educational services to young hearing-impaired children in underserved areas of Washington.
- To help a least two sites adopt the model program through replication of its major components.

MAJOR OUTREACH SERVICES

The project provides the curriculum for participants, hand-outs for parents, and instructional and play materials not available at the outreach sites. Project staff disseminate information, conduct training workshops, and provide individual on-site follow-up visits throughout the year.

The project provides a counselor specially trained to work with hearing-impaired children and their families; a sign langauge instruction program on videocassette, with VCR available on loan; and a lending library of resource materials for parents. Regular inservice training is required of ECHI Parent Trainers to upgrade skills in early childhood development, informal counseling techniques, and family dynamics. Sign language instruction for parents and parent trainers is provided by a graduate of Gallaudet College who is hearing-impaired.

APPENDIX E. DATA TABLES

Table EA1

NUMBER OF CHILDREN SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND EHA-B
BY HANDICAPPING CONDITION

DURING SCHOOL YEAR 1985-1986

STATE	ALL CONDITIONS	LEARNING DISABLED	SPEECH IMPAIRED	MENTALLY RETARDED	EMOTIONALLY DISTURBED	HARD OF HEARING & DEAF	MULTI-HANDI-CAPPED	ORTHO-PEDICALLY IMPAIRED	OTHER HEALTH IMPAIRED	VISUALLY HANDI-CAPPED	DEAF-BLIND
ALABAMA	91,107	27,751	19,992	33,638	5,903	1,140	1,011	508	652	469	43
ALASKA	11,895	6,938	3,197	690	328	190	268	155	83	44	2
ARIZONA	51,805	26,866	11,461	5,572	4,332	1,025	1,003	550	584	412	0
ARKANSAS	47,322	21,875	9,205	13,703	494	603	570	349	248	265	10
CALIFORNIA	378,800	211,940	95,572	27,119	9,612	7,347	5,162	6,964	12,544	2,440	100
COLORADO	47,953	21,569	8,136	4,445	8,479	893	3,055	971	0	318	87
CONNECTICUT	65,426	29,690	13,278	5,266	13,446	847	1,007	329	1,021	531	11
DELAWARE	15,322	7,623	1,883	1,703	3,020	289	211	361	54	141	37
DISTRICT OF COLUMBIA	7,069	3,044	1,526	1,385	792	42	62	65	96	26	31
FLORIDA	172,821	64,436	54,190	26,587	20,326	1,802	117	2,227	2,305	801	30
GEORGIA	93,295	23,237	21,596	18,078	15,224	927	12,898	501	291	513	30
HAWAII	11,947	6,992	2,287	1,261	500	235	205	373	9	74	11
IDAHO	19,159	9,181	4,074	3,172	597	361	481	503	575	212	3
ILLINOIS	242,333	99,091	71,573	30,871	29,960	3,587	0	4,156	1,721	1,284	90
INDIANA	104,417	33,846	39,757	22,906	3,638	1,220	1,432	782	284	545	7
IOWA	56,476	21,676	13,627	12,111	6,079	905	697	1,097	3	247	34
KANSAS	41,176	16,242	11,851	6,133	4,527	650	624	585	246	263	55
KENTUCKY	73,560	21,875	25,910	19,416	2,653	836	1,327	534	449	543	17
LOUISIANA	76,628	33,261	21,475	11,957	3,996	1,680	1,251	1,004	1,438	531	35
MAINE	27,845	9,903	6,823	4,522	4,441	443	777	411	396	119	10
MARYLAND	89,041	44,444	25,547	7,287	3,999	1,419	3,711	806	924	777	127
MASSACHUSETTS	141,448	49,450	32,766	30,165	19,428	1,955	3,106	1,538	2,085	883	72
MICHIGAN	161,862	63,890	42,641	23,583	21,869	2,762	1,690	4,024	493	910	0
MINNESOTA	81,488	37,181	18,759	12,499	8,896	1,504	0	1,371	845	408	25
MISSISSIPPI	53,084	22,476	17,362	11,354	338	558	298	458	5	214	21
MISSOURI	99,378	40,727	29,735	17,639	7,772	881	640	818	805	283	78
MONTANA	15,376	7,599	4,552	1,372	662	269	367	139	207	180	29
NEBRASKA	30,453	12,163	9,098	4,929	2,368	465	604	662	0	164	0
NEVADA	14,178	7,782	3,157	987	981	149	547	241	265	64	5
NEW HAMPSHIRE	16,071	9,409	3,095	1,093	1,390	233	300	157	266	114	14
NEW JERSEY	170,512	71,700	61,092	8,800	14,453	1,636	9,292	997	1,274	1,162	106
NEW MEXICO	29,556	12,342	9,401	2,421	3,037	414	809	429	551	139	13
NEW YORK	289,583	143,461	36,937	31,073	46,767	4,531	11,758	3,477	9,702	1,683	194
NORTH CAROLINA	112,934	47,733	27,036	23,748	7,317	2,096	1,812	1,029	1,510	618	35
NORTH DAKOTA	11,850	5,080	3,979	1,787	407	178	0	233	99	64	23
OHIO	198,956	73,548	54,904	52,443	7,088	2,473	3,832	3,707	0	953	8
OKLAHOMA	65,081	27,823	20,855	11,898	1,215	866	1,466	393	235	274	56
OREGON	46,575	25,175	11,087	4,448	2,611	1,207	0	846	673	459	69
PENNSYLVANIA	202,357	74,204	59,895	43,444	17,635	3,616	0	1,997	0	1,551	15
PUERTO RICO	44,620	6,209	1,760	23,593	1,375	2,717	2,975	2,407	1,156	2,316	112
RHODE ISLAND	19,152	12,463	3,259	1,326	1,265	216	90	222	217	86	8
SOUTH CAROLINA	72,157	23,607	20,535	18,657	6,220	1,028	701	711	198	478	22
SOUTH DAKOTA	13,629	4,903	5,304	1,678	604	185	530	214	93	60	58
TENNESSEE	95,380	43,477	27,655	15,413	2,520	1,630	1,739	981	1,172	769	24
TEXAS	293,418	153,535	66,886	28,507	21,145	4,846	3,980	4,263	7,963	2,201	92
UTAH	41,791	14,798	8,522	3,702	11,392	840	1,464	354	304	391	24
VERMONT	10,665	4,128	3,228	2,161	489	199	172	114	125	43	6
VIRGINIA	102,814	45,079	29,517	15,214	7,313	1,337	1,903	1,012	522	868	49
WASHINGTON	68,451	33,920	14,651	8,733	3,886	1,384	2,134	1,251	2,109	334	49
WEST VIRGINIA	46,409	18,107	13,888	10,257	2,224	469	206	422	523	297	16
WISCONSIN	75,945	29,717	18,862	12,336	11,318	1,028	821	1,010	429	393	31
WYOMING	10,654	5,281	3,320	865	258	187	126	209	334	68	6
AMERICAN SAMOA	201	0	40	134	1	10	10	4	0	0	2
GUAM	1,929	705	177	748	65	37	117	44	8	18	10
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	1,414	282	222	751	44	43	51	1	0	10	10
BUR. OF INDIAN AFFAIRS	5,388	2,905	1,334	497	244	23	292	34	51	8	0
U.S. & INSULAR AREAS	4,370,244	1,872,339	1,128,471	686,077	376,943	68,413	89,701	59,000	58,142	29,026	2,132
50 STATES, D.C. & P.R.	4,361,312	1,868,447	1,126,698	683,947	376,589	68,300	89,231	58,917	58,083	28,990	2,110

THE FIGURES REPRESENT CHILDREN 0-20 YEARS OLD SERVED UNDER CHAPTER 1 OF ECIA (SOP)
AND CHILDREN 3-21 YEARS OLD SERVED UNDER EHA-B.

DATA AS OF OCTOBER 1, 1986.

Table EA2

NUMBER OF CHILDREN 3 - 21 YEARS OLD SERVED UNDER EHA-B BY HANDICAPPING CONDITION

DURING SCHOOL YEAR 1985-1986

STATE	ALL CONDITIONS	LEARNING DISABLED	SPEECH IMPAIRED	MENTALLY RETARDED	EMOTIONALLY DISTURBED	HARD OF HEARING & DEAF	MULTI-HANDI-CAPPED	ORTHO-PEDICALLY IMPAIRED	OTHER HEALTH IMPAIRED	VISUALLY HANDI-CAPPED	DEAF-BLIND
ALABAMA	90,225	27,751	19,992	33,502	5,726	743	1,011	508	652	325	15
ALASKA	8,927	5,305	2,453	349	287	134	192	114	65	27	1
ARIZONA	50,637	26,864	11,332	5,479	4,331	554	862	481	460	274	0
ARKANSAS	43,881	21,823	9,115	11,445	477	331	309	96	179	101	5
CALIFORNIA	376,103	211,881	95,563	25,860	9,182	6,481	5,147	6,963	12,498	2,393	155
COLORADO	43,592	21,320	7,773	3,109	8,164	709	1,653	611	0	251	2
CONNECTICUT	62,058	28,632	13,267	4,379	12,995	671	713	329	1,019	53	0
DELAWARE	11,527	6,524	1,662	845	2,150	66	183	50	19	27	1
DISTRICT OF COLUMBIA	3,020	1,277	1,374	213	124	13	7	4	3	1	4
FLORIDA	163,380	64,436	54,190	20,488	17,937	1,326	0	2,094	2,257	634	18
GEORGIA	90,263	23,220	21,479	17,323	14,052	326	12,841	439	226	356	1
HAWAII	11,415	6,955	2,285	1,055	441	204	138	269	1	63	4
IDAHO	18,807	9,181	4,074	3,156	578	218	431	503	575	89	2
ILLINOIS	205,940	92,983	69,748	20,519	18,205	1,442	0	1,382	1,072	586	3
INDIANA	96,262	33,558	39,080	18,523	3,203	665	498	405	23	305	2
IOWA	55,935	21,675	13,627	11,970	5,942	741	690	1,094	0	184	12
KANSAS	39,299	16,203	11,511	5,833	4,221	400	295	428	196	193	19
KENTUCKY	70,392	21,739	25,586	18,251	2,355	497	843	373	371	373	4
LOUISIANA	71,925	33,139	21,391	9,758	3,528	1,031	659	739	1,284	381	15
MAINE	26,532	9,870	6,796	4,131	3,990	348	540	394	349	112	2
MARYLAND	87,146	44,420	25,538	6,832	3,704	1,060	3,253	783	902	583	71
MASSACHUSETTS	126,448	44,155	29,315	26,984	17,373	1,745	2,778	1,372	1,877	793	56
MICHIGAN	150,041	63,878	42,641	16,040	19,915	2,601	56	4,024	0	886	0
MINNESOTA	81,067	37,181	18,759	12,314	8,854	1,351	0	1,371	845	375	17
MISSISSIPPI	51,929	22,474	17,172	10,933	336	310	185	404	0	113	2
MISSOURI	96,765	40,727	29,735	15,386	7,711	680	588	817	805	244	72
MONTANA	14,785	7,597	4,540	1,231	616	140	275	118	190	61	17
NEBRASKA	30,182	12,163	9,098	4,861	2,290	420	560	662	0	128	0
NEVADA	13,567	7,781	3,046	928	842	149	431	224	101	62	3
NEW HAMPSHIRE	14,896	9,206	3,040	774	1,266	66	161	122	230	26	5
NEW JERSEY	165,196	71,633	61,037	6,928	14,035	1,274	8,143	825	1,075	237	9
NEW MEXICO	29,143	12,342	9,401	2,395	2,965	308	648	429	551	91	13
NEW YORK	249,180	141,130	28,512	24,492	37,145	2,219	5,103	1,236	8,143	1,182	18
NORTH CAROLINA	109,477	47,675	27,025	22,854	6,700	1,320	1,017	953	1,407	517	9
NORTH DAKOTA	11,251	5,071	3,922	1,550	403	112	0	118	39	36	0
OHIO	190,447	73,548	54,904	44,435	6,829	2,344	3,832	3,707	0	840	8
OKLAHOMA	63,635	27,789	20,855	11,326	1,103	594	1,173	375	186	186	48
OREGON	41,304	25,054	10,982	1,822	2,143	171	0	597	463	61	11
PENNSYLVANIA	182,319	71,575	58,853	34,194	12,956	2,587	0	1,037	0	1,107	10
PUERTO RICO	43,501	6,209	1,760	22,767	1,315	2,714	2,925	2,272	1,121	2,306	112
RHODE ISLAND	18,529	12,377	3,212	1,146	1,167	165	51	184	157	66	4
SOUTH CAROLINA	71,058	23,509	20,535	18,096	6,186	856	525	710	198	421	22
SOUTH DAKOTA	13,082	4,901	5,304	1,525	517	98	487	115	87	37	11
TENNESSEE	94,091	43,454	27,655	15,095	2,152	1,292	1,683	981	1,149	619	11
TEXAS	282,184	153,268	66,348	25,538	20,702	1,007	3,333	3,916	6,391	1,638	43
UTAH	39,985	14,796	8,438	3,302	11,257	309	1,262	249	240	127	5
VERMONT	8,186	3,997	2,628	890	398	95	17	49	82	28	2
VIRGINIA	100,866	45,076	29,515	15,121	7,029	1,106	1,360	987	476	170	26
WASHINGTON	64,699	33,484	14,422	7,706	3,703	1,114	1,231	891	1,889	245	14
WEST VIRGINIA	44,840	18,070	13,714	9,797	2,101	325	206	328	91	208	0
WISCONSIN	73,488	29,671	18,461	11,431	11,119	813	667	727	323	257	19
WYOMING	9,322	5,172	2,703	723	209	135	0	118	211	48	3
AMERICAN SAMOA	146	0	39	96	0	9	0	2	0	0	0
GUAM	1,548	705	162	599	21	4	17	27	6	7	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	1,293	282	222	688	32	37	22	0	0	10	0
BUR. OF INDIAN AFFAIRS	5,388	2,905	1,334	497	244	23	292	34	51	8	0
U.S. & INSULAR AREAS	4,121,104	1,847,591	1,107,125	597,484	333,226	46,453	69,293	48,040	50,535	20,451	906
50 STATES, D.C. & P.R.	4,112,729	1,843,699	1,105,368	595,684	332,929	46,380	68,962	47,977	50,478	20,426	906

DATA AS OF OCTOBER 1, 1986.

Table EA3

NUMBER OF CHILDREN 3 - 5 YEARS OLD SERVED UNDER EHA-B BY HANDICAPPING CONDITION

DURING SCHOOL YEAR 1985-1986

STATE	ALL CONDITIONS	LEARNING DISABLED	SPEECH IMPAIRED	MENTALLY RETARDED	EMOTIONALLY DISTURBED	HARD OF HEARING & DEAF	MULTI-HANDI-CAPPED	ORTHO-PEDICALLY IMPAIRED	OTHER HEALTH IMPAIRED	VISUALLY HANDI-CAPPED	DEAF-BLIND
ALABAMA	2,941	28	2,574	171	20	28	70	23	18	9	0
ALASKA	759	47	621	6	0	21	42	10	10	2	0
ARIZONA	2,309	116	1,635	276	61	40	65	86	5	25	0
ARKANSAS	2,465	59	2,082	120	7	41	88	19	29	20	0
CALIFORNIA	21,081	2,412	12,052	2,680	169	909	1,002	1,194	393	249	21
COLORADO	1,653	266	911	47	55	74	231	51	0	18	0
CONNECTICUT	4,533	327	3,401	143	215	124	132	51	135	5	0
DELAWARE	730	343	237	69	47	8	17	0	3	5	1
DISTRICT OF COLUMBIA	374	5	335	0	26	2	2	2	2	0	0
FLORIDA	8,448	126	6,655	780	166	164	0	314	181	61	1
GEORGIA	4,166	7	3,078	337	257	26	360	61	15	25	0
HAWAII	499	47	254	53	7	27	42	61	0	7	1
IDAHO	1,488	187	873	239	24	12	16	76	50	11	0
ILLINOIS	20,402	3,005	15,187	693	1,028	152	0	223	66	48	0
INDIANA	5,030	54	4,422	309	8	73	112	38	4	10	0
IOWA	5,144	76	3,141	1,227	213	121	89	249	0	28	0
KANSAS	2,671	99	1,979	261	71	48	49	68	53	35	8
KENTUCKY	4,266	29	3,837	198	11	35	61	42	24	28	1
LOUISIANA	5,185	408	3,334	615	39	155	151	165	262	53	3
MAINE	2,517	70	1,623	282	188	65	133	82	41	33	0
MARYLAND	6,114	232	4,236	426	48	134	505	210	235	81	7
MASSACHUSETTS	7,218	425	3,502	1,314	592	246	274	368	425	72	0
MICHIGAN	12,439	1,607	8,572	649	325	353	8	832	0	93	0
MINNESOTA	8,146	829	5,259	1,043	264	200	0	272	201	74	4
MISSISSIPPI	1,705	4	1,493	116	0	9	33	40	0	10	0
MISSOURI	5,914	487	4,538	274	194	62	219	58	37	24	21
MONTANA	1,552	92	1,233	84	6	27	43	24	34	7	2
NEBRASKA	2,853	181	1,941	317	40	48	123	177	0	26	0
NEVADA	886	142	497	28	4	25	158	19	1	9	3
NEW HAMPSHIRE	1,027	22	824	30	5	4	52	43	40	6	1
NEW JERSEY	13,990	658	8,745	116	135	106	3,757	91	335	46	1
NEW MEXICO	1,250	31	749	201	76	28	76	49	32	8	0
NEW YORK	6,240	644	3,964	277	360	112	79	135	577	88	4
NORTH CAROLINA	5,760	235	4,570	474	29	88	137	113	87	26	1
NORTH DAKOTA	1,051	70	846	78	11	13	0	23	6	4	0
OHIO	7,737	157	6,231	291	88	340	364	220	0	45	1
OKLAHOMA	5,715	148	4,530	234	8	109	487	111	36	40	12
OREGON	1,219	34	1,083	31	7	6	0	37	16	5	0
PENNSYLVANIA	7,668	478	6,088	649	128	192	0	95	0	38	0
PUERTO RICO	1,711	76	590	276	50	164	271	63	146	69	6
RHODE ISLAND	1,189	364	567	111	48	21	25	35	7	11	0
SOUTH CAROLINA	5,211	18	4,158	506	19	79	303	51	42	24	11
SOUTH DAKOTA	1,995	126	1,505	81	15	26	161	50	18	10	3
TENNESSEE	6,487	108	5,484	347	5	123	226	118	39	34	3
TEXAS	19,689	2,593	13,005	1,577	255	132	509	727	622	264	5
UTAH	2,243	254	1,204	219	232	35	210	55	23	10	1
VERMONT	474	23	423	17	1	4	2	2	1	1	0
VIRGINIA	9,133	340	6,496	1,091	72	190	259	472	138	55	20
WASHINGTON	5,571	257	3,607	807	148	189	223	225	77	38	0
WEST VIRGINIA	2,512	31	2,087	83	19	32	206	42	5	7	0
WISCONSIN	8,799	907	6,067	760	478	175	159	186	27	38	2
WYOMING	354	27	292	15	0	3	0	9	8	0	0
AMERICAN SAMOA	5	0	2	1	0	0	0	2	0	0	0
GUAM	64	1	33	18	0	0	1	9	2	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	52	8	30	4	1	1	8	0	0	0	0
BUR. OF INDIAN AFFAIRS	297	35	198	17	4	3	17	8	15	0	0
U.S. & INSULAR AREAS	260,931	19,355	182,880	21,068	6,279	5,404	11,557	7,786	4,523	1,935	144
50 STATES, D.C. & P.R.	260,513	19,311	182,617	21,028	6,274	5,400	11,531	7,767	4,506	1,935	144

DATA AS OF OCTOBER 1, 1986.

Table EA4

NUMBER OF CHILDREN 6 - 11 YEARS OLD SERVED UNDER EHA-B BY HANDICAPPING CONDITION

DURING SCHOOL YEAR 1985-1986

STATE	ALL CONDITIONS	LEARNING DISABLED	SPEECH IMPAIRED	MENTALLY RETARDED	EMOTIONALLY DISTURBED	HARD OF HEARING & DEAF	MULTI-HANDI-CAPPED	ORTHO-PEDICALLY IMPAIRED	OTHER HEALTH IMPAIRED	VISUALLY HANDI-CAPPED	DEAF-BLIND
ALABAMA	37,370	9,061	15,757	8,994	2,209	316	452	223	202	148	8
ALASKA	4,506	2,347	1,686	114	119	49	74	77	28	11	1
ARIZONA	24,428	11,246	8,838	1,853	1,525	221	349	228	45	123	0
ARKANSAS	20,129	8,639	6,519	4,326	215	163	121	32	71	40	3
CALIFORNIA	183,767	89,865	69,138	7,902	2,921	2,552	1,863	2,526	5,958	1,009	33
COLORADO	21,475	10,048	5,949	1,020	2,977	292	747	321	0	121	0
CONNECTICUT	27,612	12,639	8,736	1,247	3,838	271	291	144	420	26	0
DELAWARE	5,301	2,811	1,321	272	754	26	87	13	7	10	0
DISTRICT OF COLUMBIA	1,402	404	925	37	31	0	4	0	1	0	0
FLORIDA	85,533	27,881	40,842	6,889	7,640	527	0	962	508	279	5
GEORGIA	43,258	7,734	16,571	4,841	6,236	122	7,311	176	89	177	1
HAWAII	5,312	2,678	1,784	379	169	88	59	125	0	27	3
IDAHO	9,534	4,792	2,979	1,231	193	103	18	109	80	29	0
ILLINOIS	100,462	39,209	49,195	5,556	4,749	650	0	556	286	261	0
INDIANA	54,577	13,575	32,163	6,603	1,378	302	220	198	11	126	1
IOWA	25,559	8,605	9,782	4,040	2,025	312	236	480	0	75	4
KANSAS	20,468	7,145	9,036	2,168	1,376	194	167	212	84	80	6
KENTUCKY	36,257	7,529	20,137	6,512	868	262	427	155	177	188	2
LOUISIANA	29,679	8,897	15,206	2,768	1,119	448	265	286	524	165	1
MAINE	12,628	4,340	4,536	1,491	1,535	136	218	207	120	45	0
MARYLAND	39,274	17,047	16,957	1,820	1,027	444	1,206	289	266	202	16
MASSACHUSETTS	58,253	21,525	13,108	12,234	8,040	698	1,164	465	699	291	29
MICHIGAN	68,831	23,589	30,623	4,980	6,692	1,040	0	1,568	0	339	0
MINNESOTA	36,519	16,496	11,861	4,181	2,257	624	0	624	325	148	3
MISSISSIPPI	24,879	7,081	13,943	3,297	116	118	83	193	0	47	1
MISSOURI	49,492	17,318	22,634	5,206	3,078	310	202	391	215	114	24
MONTANA	7,412	3,348	3,085	452	211	59	95	60	67	31	4
NEBRASKA	14,936	5,018	6,643	1,695	819	176	265	270	0	50	0
NEVADA	6,489	3,248	2,262	344	358	45	117	64	24	27	0
NEW HAMPSHIRE	6,624	3,776	1,927	301	359	19	68	50	111	12	1
NEW JERSEY	82,574	28,705	46,179	1,553	3,070	512	2,065	285	129	74	2
NEW MEXICO	14,356	5,015	6,376	795	1,261	126	281	219	236	43	4
NEW YORK	101,698	55,503	20,000	7,148	12,460	883	2,146	456	2,638	454	10
NORTH CAROLINA	50,775	17,219	20,719	7,336	2,934	664	476	471	690	263	3
NORTH DAKOTA	5,891	2,225	2,840	543	129	68	0	54	16	16	0
OHIO	93,907	27,821	44,745	14,534	2,408	994	1,834	1,180	0	387	4
OKLAHOMA	32,912	11,329	15,554	4,427	475	272	494	165	78	93	25
OREGON	22,146	11,439	8,903	589	725	81	0	214	169	21	5
PENNSYLVANIA	89,768	26,277	47,144	10,228	4,223	1,065	0	364	0	462	5
PUERTO RICO	12,177	2,704	755	6,071	577	545	830	210	218	221	46
RHODE ISLAND	8,554	5,294	2,331	307	396	67	11	82	36	29	1
SOUTH CAROLINA	34,571	10,146	15,113	5,432	2,717	431	90	330	94	215	3
SOUTH DAKOTA	6,579	1,981	3,588	573	114	44	193	49	22	10	5
TENNESSEE	45,250	16,878	20,460	4,763	820	561	691	396	347	329	5
TEXAS	135,300	63,990	48,768	8,665	7,329	372	1,385	1,526	2,593	651	21
UTAH	24,079	8,764	6,981	1,354	5,989	179	535	101	112	64	0
VERMONT	4,310	1,879	1,889	320	100	45	3	22	40	12	0
VIRGINIA	47,373	18,435	20,791	4,424	2,227	444	502	302	194	54	0
WASHINGTON	30,537	13,874	10,050	2,803	1,338	507	486	399	969	104	7
WEST VIRGINIA	21,986	6,956	10,414	3,381	790	139	0	155	41	110	0
WISCONSIN	30,446	11,106	10,949	3,603	3,601	354	302	307	114	104	6
WYOMING	5,237	2,393	2,224	265	57	77	0	61	129	29	2
AMERICAN SAMOA	70	0	34	31	0	5	0	0	0	0	0
GUAM	537	206	123	177	6	1	11	10	2	1	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	448	138	121	142	13	15	13	0	0	6	0
BUR. OF INDIAN AFFAIRS	2,657	1,248	883	202	105	15	158	15	25	6	0
U.S. & INSULAR AREAS	1,966,104	749,416	812,077	192,419	118,698	19,033	28,615	18,377	19,210	7,959	300
50 STATES, D.C. & P.R.	1,962,392	747,824	810,916	191,867	118,574	18,997	28,433	18,352	19,183	7,946	300

DATA AS OF OCTOBER 1, 1986.

Table EA5

NUMBER OF CHILDREN 12 - 17 YEARS OLD SERVED UNDER EHA-B BY HANDICAPPING CONDITION

DURING SCHOOL YEAR 1985-1986

STATE	ALL CONDITIONS	LEARNING DISABLED	SPEECH IMPAIRED	MENTALLY RETARDED	EMOTIONALLY DISTURBED	HARD OF HEARING & DEAF	MULTI-HANDI-CAPPED	ORTHO-PEDICALLY IMPAIRED	OTHER HEALTH IMPAIRED	VISUALLY HANDI-CAPPED	DEAF-BLIND
ALABAMA	41,188	16,229	1,578	19,007	3,017	323	339	211	341	140	3
ALASKA	3,343	2,707	143	167	162	55	52	25	22	10	0
ARIZONA	21,587	14,444	840	2,550	2,535	265	326	141	374	112	0
ARKANSAS	19,621	12,272	492	6,264	243	108	85	41	76	39	1
CALIFORNIA	153,495	111,166	13,652	10,103	5,294	2,499	1,557	2,687	5,517	966	54
COLORADO	18,773	10,234	896	1,632	4,780	315	594	214	0	106	2
CONNECTICUT	25,912	14,403	1,086	2,101	7,356	213	230	109	395	19	0
DELAWARE	5,048	3,094	103	445	1,256	29	68	32	9	12	0
DISTRICT OF COLUMBIA	1,004	732	109	94	57	10	0	1	0	1	0
FLORIDA	63,717	34,143	6,472	10,452	9,693	534	0	704	1,436	276	7
GEORGIA	39,143	14,498	1,773	10,329	7,231	156	4,718	175	114	149	0
HAWAII	5,283	4,064	246	521	241	75	32	74	1	29	0
IDAHO	6,049	3,905	212	1,232	328	69	91	66	116	30	0
ILLINOIS	77,962	47,687	5,202	11,945	11,104	591	0	510	662	260	1
INDIANA	33,793	18,611	2,429	10,294	1,726	260	150	153	6	163	1
IOWA	22,606	12,012	683	5,559	3,431	276	255	320	0	64	6
KANSAS	14,909	8,459	488	2,879	2,623	143	62	125	51	75	4
KENTUCKY	27,271	13,149	1,571	10,230	1,411	182	274	159	157	137	1
LOUISIANA	32,648	21,671	2,735	4,735	2,188	338	167	238	427	141	8
MAINE	10,376	5,071	613	1,979	2,119	129	163	97	173	30	2
MARYLAND	37,134	25,148	4,112	3,246	2,342	414	1,124	214	281	236	17
MASSACHUSETTS	55,795	20,616	12,554	11,716	7,700	670	1,117	446	670	279	27
MICHIGAN	61,626	35,670	3,364	7,861	11,994	1,007	0	1,337	0	393	0
MINNESOTA	33,306	18,674	1,579	5,718	5,994	478	0	427	289	141	6
MISSISSIPPI	22,777	14,053	1,702	6,396	210	160	52	152	0	52	0
MISSOURI	37,884	21,365	2,506	8,547	4,129	267	142	305	507	95	21
MONTANA	5,263	3,832	205	551	381	48	108	31	82	21	4
NEBRASKA	11,094	6,417	504	2,292	1,355	168	135	175	0	48	0
NEVADA	5,708	4,137	266	456	460	68	95	129	75	22	0
NEW HAMPSHIRE	6,693	5,013	280	364	861	36	32	27	72	6	2
NEW JERSEY	62,107	39,230	5,929	3,700	9,812	542	1,882	371	541	98	2
NEW MEXICO	12,443	6,849	2,151	1,071	1,546	139	258	124	265	33	7
NEW YORK	126,471	78,072	4,414	12,863	22,377	1,012	2,219	556	4,384	570	4
NORTH CAROLINA	47,734	27,951	1,685	12,635	3,557	511	309	316	558	209	3
NORTH DAKOTA	3,872	2,557	231	741	248	29	0	34	16	16	0
OHIO	80,286	42,235	3,825	25,711	4,012	874	1,261	1,998	0	368	2
OKLAHOMA	23,253	15,388	753	5,956	581	188	169	93	67	50	8
OREGON	16,371	12,687	967	872	1,312	77	0	233	192	27	4
PENNSYLVANIA	74,857	40,909	5,422	18,645	7,813	1,135	0	407	0	521	5
PUERTO RICO	19,691	2,951	250	11,993	520	973	993	786	386	797	42
RHODE ISLAND	8,081	6,310	312	525	680	61	10	55	104	23	1
SOUTH CAROLINA	28,124	12,568	1,215	10,159	3,316	311	68	269	47	166	5
SOUTH DAKOTA	4,067	2,551	204	739	369	25	106	15	44	13	1
TENNESSEE	37,471	24,172	1,641	8,083	1,223	506	554	393	661	235	3
TEXAS	114,591	79,406	4,483	11,998	12,260	415	1,131	1,398	2,830	660	10
UTAH	12,769	5,577	248	1,457	4,826	87	339	83	95	53	4
VERMONT	3,143	1,978	304	466	273	41	3	23	40	14	1
VIRGINIA	39,557	24,462	2,138	7,370	4,365	416	454	178	120	51	3
WASHINGTON	26,290	18,191	744	3,370	2,092	384	399	247	763	94	6
WEST VIRGINIA	17,871	10,072	1,061	5,190	1,188	139	0	102	38	81	0
WISCONSIN	30,313	16,087	1,410	5,439	6,515	246	151	203	160	98	4
WYOMING	3,368	2,530	176	350	144	49	0	40	63	15	1
AMERICAN SAMOA	66	0	3	59	0	4	0	0	0	0	0
GUAM	825	438	6	349	15	1	5	7	2	2	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	590	135	67	355	18	10	1	0	0	4	0
BUR. OF INDIAN AFFAIRS	2,174	1,474	237	231	121	4	90	10	6	1	0
U.S. & INSULAR AREAS	1,697,393	998,256	108,271	309,992	191,404	18,865	22,370	17,266	23,235	8,251	283
50 STATES, D.C. & P.R.	1,693,738	996,209	107,958	308,998	191,250	18,846	22,274	17,249	23,227	8,244	283

DATA AS OF OCTOBER 1, 1986.

Table EA6

NUMBER OF CHILDREN 18 - 21 YEARS OLD SERVED UNDER EHA-B BY HANDICAPPING CONDITION

DURING SCHOOL YEAR 1985-1986

STATE	ALL CONDITIONS	LEARNING DISABLED	SPEECH IMPAIRED	MENTALLY RETARDED	EMOTIONALLY DISTURBED	HARD OF HEARING & DEAF	MULTI-HANDI-CAPPED	ORTHO-PEDICALLY IMPAIRED	OTHER HEALTH IMPAIRED	VISUALLY HANDI-CAPPED	DEAF-BLIND
ALABAMA	8,726	2,433	83	5,330	480	76	150	51	91	28	4
ALASKA	319	204	3	62	6	9	24	2	5	4	0
ARIZONA	2,313	1,058	19	800	210	28	122	26	36	14	0
ARKANSAS	1,666	853	22	735	12	19	15	4	3	2	1
CALIFORNIA	17,760	8,418	721	5,175	798	521	725	556	630	169	47
COLORADO	1,691	772	17	410	352	28	81	25	0	6	0
CONNECTICUT	4,001	1,263	44	888	1,586	63	60	25	69	3	0
DELAWARE	448	276	1	59	93	3	11	5	0	0	0
DISTRICT OF COLUMBIA	240	136	5	82	10	1	1	1	0	0	4
FLORIDA	5,682	2,286	221	2,367	438	101	0	114	132	18	5
GEORGIA	3,696	981	57	1,816	328	22	452	27	8	5	0
HAWAII	321	166	1	102	24	14	5	9	0	0	0
IDAHO	1,736	297	10	454	33	34	306	252	329	19	2
ILLINOIS	7,114	3,082	164	2,325	1,324	49	0	93	58	17	2
INDIANA	2,862	1,318	66	1,317	91	30	16	16	2	6	0
IOWA	2,626	982	21	1,144	273	32	110	45	0	17	2
KANSAS	1,251	500	8	525	151	15	17	23	8	3	1
KENTUCKY	2,598	1,032	41	1,311	65	18	81	17	13	20	0
LOUISIANA	4,413	2,163	116	1,640	182	90	76	50	71	22	3
MAINE	1,011	389	24	379	148	18	26	8	15	4	0
MARYLAND	4,624	1,993	233	1,340	287	68	418	70	120	64	31
MASSACHUSETTS	5,182	1,589	151	1,720	1,041	131	223	93	83	151	0
MICHIGAN	7,145	3,012	82	2,550	904	201	48	287	0	61	0
MINNESOTA	3,096	1,182	60	1,372	339	49	0	48	30	12	4
MISSISSIPPI	2,568	1,336	34	1,124	10	23	17	19	0	4	1
MISSOURI	3,475	1,557	57	1,359	310	41	25	63	46	11	6
MONTANA	558	325	17	144	18	6	29	3	7	2	7
NEBRASKA	1,299	547	10	557	76	28	37	40	0	4	0
NEVADA	484	254	21	100	20	11	61	12	1	4	0
NEW HAMPSHIRE	552	395	9	79	41	7	9	2	7	2	1
NEW JERSEY	6,525	3,040	184	1,559	1,018	114	439	78	70	19	4
NEW MEXICO	1,094	447	125	328	82	15	33	37	18	7	2
NEW YORK	14,771	6,911	134	4,204	1,948	212	659	89	544	70	0
NORTH CAROLINA	5,208	2,270	51	2,409	180	57	95	53	72	19	2
NORTH DAKOTA	437	219	5	188	15	2	0	7	1	0	0
OHIO	8,517	3,335	103	3,899	321	136	373	309	0	40	1
OKLAHOMA	1,755	924	18	709	39	25	23	6	5	3	3
OREGON	1,568	894	29	330	99	7	0	113	86	8	2
PENNSYLVANIA	10,026	3,911	199	4,672	792	195	0	171	0	86	0
PUERTO RICO	9,922	478	165	4,427	168	1,032	831	1,213	371	1,219	18
RHODE ISLAND	705	409	2	203	43	16	5	12	10	3	2
SOUTH CAROLINA	3,152	777	49	1,999	134	35	64	60	15	16	3
SOUTH DAKOTA	441	243	7	132	19	3	27	1	3	4	2
TENNESSEE	4,883	2,296	70	1,902	104	102	212	74	102	21	0
TEXAS	12,604	7,279	92	3,298	858	88	308	265	346	63	7
UTAH	894	201	5	272	210	8	178	10	10	0	0
VERMONT	259	117	12	87	24	5	9	2	1	1	1
VIRGINIA	4,803	1,839	90	2,236	365	56	145	35	24	10	3
WASHINGTON	2,301	1,162	21	726	125	34	123	20	80	9	1
WEST VIRGINIA	2,471	1,011	152	1,143	104	15	0	29	7	10	0
WISCONSIN	3,930	1,571	35	1,629	525	38	55	31	22	17	7
WYOMING	363	222	11	93	8	6	0	8	11	4	0
AMERICAN SAMOA	5	0	0	5	0	0	0	0	0	0	0
GUAM	122	60	0	55	0	2	0	1	0	4	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	203	1	4	187	0	11	0	0	0	0	0
BUR. OF INDIAN AFFAIRS	260	148	16	47	14	1	27	1	5	1	0
U.S. & INSULAR AREAS	196,676	80,564	3,897	74,005	16,845	3,951	6,751	4,611	3,567	2,306	179
50 STATES, D.C. & P.R.	196,086	80,355	3,877	73,711	16,831	3,937	6,724	4,609	3,562	2,301	179

DATA AS OF OCTOBER 1, 1986.

Table EA7

NUMBER OF CHILDREN 0-20 YEARS OLD SERVED UNDER CHAPTER 1 OF ECIA (SOP) BY HANDICAPPING CONDITION

DURING SCHOOL YEAR 1985-1986

STATE	ALL CONDITIONS	LEARNING DISABLED	SPEECH IMPAIRED	MENTALLY RETARDED	EMOTIONALLY DISTURBED	HARD OF HEARING & DEAF	MULTI-HANDI-CAPPED	ORTHO-PEDICALLY IMPAIRED	OTHER HEALTH IMPAIRED	VISUALLY HANDI-CAPPED	DEAF-BLIND
ALABAMA	882	0	0	136	177	397	0	0	0	144	28
ALASKA	2,968	1,633	744	341	41	56	76	41	18	17	1
ARIZONA	1,168	2	129	93	1	471	141	69	124	138	0
ARKANSAS	3,441	52	90	2,258	17	272	261	253	69	164	5
CALIFORNIA	2,785	79	9	1,259	430	866	15	1	46	55	25
COLORADO	4,361	249	363	1,336	315	184	1,402	360	0	67	85
CONNECTICUT	3,368	1,058	11	887	451	176	294	0	2	478	11
DELAWARE	3,795	1,099	221	858	870	223	28	311	35	114	36
DISTRICT OF COLUMBIA	4,049	1,767	152	1,172	668	29	55	61	93	25	27
FLORIDA	9,441	0	0	6,099	2,389	476	117	133	48	167	12
GEORGIA	3,032	17	117	755	1,172	601	57	62	65	157	29
HAWAII	532	37	2	206	59	31	67	104	8	11	7
IDAHO	352	0	0	16	19	143	50	0	0	123	1
ILLINOIS	36,393	6,108	1,825	10,352	11,755	2,145	0	2,774	649	698	87
INDIANA	8,155	288	677	4,383	435	555	934	377	261	240	5
IOWA	541	1	0	141	137	164	7	3	3	63	22
KANSAS	1,877	39	340	300	306	250	329	157	50	70	36
KENTUCKY	3,168	136	324	1,165	298	339	484	161	78	170	13
LOUISIANA	4,703	122	84	2,199	468	649	592	265	154	150	20
MAINE	1,313	33	27	391	451	95	237	17	47	7	8
MARYLAND	1,895	24	9	455	295	359	458	23	22	194	56
MASSACHUSETTS	15,000	5,295	3,451	3,181	2,055	210	328	166	208	90	16
MICHIGAN	11,821	12	0	7,543	1,954	161	1,634	0	493	24	0
MINNESOTA	421	0	0	185	42	153	0	0	0	33	8
MISSISSIPPI	1,155	2	190	421	2	248	113	54	5	101	19
MISSOURI	2,613	0	0	2,253	61	201	52	1	0	39	6
MONTANA	591	2	12	141	46	129	92	21	17	119	12
NEBRASKA	271	0	0	68	78	45	44	0	0	36	0
NEVADA	611	1	111	59	139	0	116	17	164	2	2
NEW HAMPSHIRE	1,175	203	55	319	124	167	139	35	36	88	9
NEW JERSEY	5,316	67	55	1,872	418	362	1,149	172	199	925	97
NEW MEXICO	413	0	0	26	72	106	161	0	0	48	0
NEW YORK	40,403	2,331	8,425	6,581	9,622	2,312	6,655	2,241	1,559	501	176
NORTH CAROLINA	3,457	58	11	894	617	776	795	76	103	101	26
NORTH DAKOTA	599	9	57	237	4	66	0	115	60	28	23
OHIO	8,509	0	0	8,008	259	129	0	0	0	113	0
OKLAHOMA	1,446	34	0	572	112	272	293	18	49	88	8
OREGON	5,271	121	105	2,626	468	1,036	0	249	210	398	58
PENNSYLVANIA	20,038	2,629	1,042	9,250	4,679	1,029	0	960	0	444	5
PUERTO RICO	1,119	0	0	826	60	3	50	135	35	10	0
RHODE ISLAND	623	86	47	180	98	51	39	38	60	20	4
SOUTH CAROLINA	1,099	98	0	561	34	172	176	1	0	57	0
SOUTH DAKOTA	547	2	0	153	87	87	43	99	6	23	47
TENNESSEE	1,289	23	0	318	368	338	56	0	23	150	13
TEXAS	11,234	267	538	2,969	443	3,839	647	347	1,572	563	49
UTAH	1,806	2	84	400	135	531	202	105	64	264	19
VERMONT	2,479	131	600	1,271	91	104	155	65	43	15	4
VIRGINIA	1,948	3	2	93	284	231	543	25	46	698	23
WASHINGTON	3,752	436	229	1,027	183	270	903	360	220	89	35
WEST VIRGINIA	1,569	37	174	460	123	144	0	94	432	89	16
WISCONSIN	2,457	46	401	905	199	215	154	283	106	136	12
WYOMING	1,332	109	617	142	49	52	126	91	123	20	3
AMERICAN SAMOA	55	0	1	38	1	1	10	2	0	0	2
GUAM	381	0	15	149	44	33	100	17	2	11	10
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	121	0	0	63	12	6	29	1	0	0	10
BUR. OF INDIAN AFFAIRS	-	-	-	-	-	-	-	-	-	-	-
U.S. & INSULAR AREAS	249,140	24,748	21,346	88,593	43,717	21,960	20,408	10,960	7,607	8,575	1,226
50 STATES, D.C. & P.R.	248,583	24,748	21,338	88,343	43,660	21,920	20,269	10,940	7,605	8,564	1,204

DATA AS OF OCTOBER 1, 1986.

Table EA8

NUMBER AND CHANGE IN NUMBER OF CHILDREN SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND EHA-B

ALL CONDITIONS

	←NUMBER SERVED→			←CHANGE IN NUMBER SERVED→		←PERCENT CHANGE IN NUMBER SERVED→	
STATE	1976-77	1984-85	1985-86	1976-77 - 1985-86	1984-85 - 1985-86	1976-77 - 1985-86	1984-85 - 1985-86
ALABAMA	53,987	88,976	91,107	37,120	2,131	68.8	2.4
ALASKA	9,597	11,360	11,895	2,298	535	23.9	4.7
ARIZONA	43,045	52,198	51,805	8,760	-393	20.4	-0.8
ARKANSAS	28,487	48,043	47,322	18,835	-721	66.1	-1.5
CALIFORNIA	332,291	369,142	378,888	46,597	9,746	14.0	2.6
COLORADO	47,943	46,805	47,953	10	1,148	0.0	2.5
CONNECTICUT	62,085	65,478	65,426	3,341	-52	5.4	-0.1
DELAWARE	14,307	15,018	15,322	1,015	304	7.1	2.0
DISTRICT OF COLUMBIA	9,261	7,394	7,069	-2,192	-325	-23.7	-4.4
FLORIDA	117,257	165,302	172,821	55,564	7,519	47.4	4.5
GEORGIA	85,209	102,448	93,295	8,086	-9,153	9.5	-8.9
HAWAII	10,544	12,394	11,947	1,403	-447	13.3	-3.6
IDAHO	14,573	18,144	19,159	4,586	1,015	31.5	5.6
ILLINOIS	229,797	245,647	242,333	12,536	-3,314	5.5	-1.3
INDIANA	87,644	104,183	104,417	16,773	234	19.1	0.2
IOWA	51,055	57,500	56,476	5,421	-1,024	10.6	-1.8
KANSAS	37,623	41,419	41,176	3,553	-243	9.4	-0.6
KENTUCKY	57,057	74,901	73,560	16,503	-1,341	28.9	-1.8
LOUISIANA	86,989	81,379	76,628	-10,361	-4,751	-11.9	-5.8
MAINE	23,701	27,452	27,845	4,144	393	17.5	1.4
MARYLAND	84,184	90,462	89,041	4,857	-1,421	5.8	-1.6
MASSACHUSETTS	131,992	140,890	141,448	9,456	558	7.2	0.4
MICHIGAN	153,113	162,317	161,862	8,749	-455	5.7	-0.3
MINNESOTA	72,136	80,640	81,488	9,352	848	13.0	1.1
MISSISSIPPI	29,219	52,068	53,084	23,865	1,016	81.7	2.0
MISSOURI	94,387	98,570	99,378	4,991	808	5.3	0.8
MONTANA	8,610	15,930	15,376	6,766	-554	78.6	-3.5
NEBRASKA	25,270	30,273	30,453	5,183	180	20.5	0.6
NEVADA	11,133	14,087	14,178	3,045	91	27.4	0.6
NEW HAMPSHIRE	9,916	15,561	16,071	6,155	510	62.1	3.3
NEW JERSEY	145,077	166,982	170,512	25,435	3,530	17.5	2.1
NEW MEXICO	15,149	28,188	29,556	14,407	1,368	95.1	4.9
NEW YORK	240,250	269,320	269,583	49,333	263	20.5	0.1
NORTH CAROLINA	98,035	119,688	112,934	14,899	-6,754	15.2	-5.6
NORTH DAKOTA	8,976	11,941	11,850	2,874	-91	32.0	-0.8
OHIO	168,314	201,169	198,956	30,642	-2,213	18.2	-1.1
OKLAHOMA	44,181	65,093	65,081	20,900	-12	47.3	0.0
OREGON	37,258	48,153	46,575	9,317	-1,578	25.0	-3.3
PENNSYLVANIA	206,792	196,779	202,357	-4,435	5,578	-2.1	2.8
PUERTO RICO	11,200	40,327	44,620	33,420	4,293	298.4	10.6
RHODE ISLAND	15,971	19,045	19,152	3,181	107	19.9	0.6
SOUTH CAROLINA	72,357	72,610	72,157	-200	-453	-0.3	-0.6
SOUTH DAKOTA	9,936	13,008	13,629	3,693	621	37.2	4.8
TENNESSEE	99,251	98,954	95,380	-3,871	-3,574	-3.9	-3.6
TEXAS	233,552	294,830	293,418	59,866	-1,412	25.6	-0.5
UTAH	37,204	41,809	41,791	4,587	-18	12.3	0.0
VERMONT	6,382	10,256	10,665	4,283	409	67.1	4.0
VIRGINIA	77,616	103,374	102,814	25,198	-560	32.5	-0.5
WASHINGTON	57,705	67,859	68,451	10,746	592	18.6	0.9
WEST VIRGINIA	30,135	44,153	46,409	16,274	2,256	54.0	5.1
WISCONSIN	58,019	74,861	75,945	17,926	1,084	30.9	1.4
WYOMING	7,261	11,041	10,654	3,393	-387	46.7	-3.5
AMERICAN SAMOA	139	116	201	62	85	44.6	73.3
GUAM	2,597	1,995	1,929	-668	-66	-25.7	-3.3
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	1,120	-	-	-	-	-	-
VIRGIN ISLANDS	1,712	135	1,414	-298	1,279	-17.4	947.4
BUR. OF INDIAN AFFAIRS	-	5,364	5,388	-	24	-	0.4
U.S. & INSULAR AREAS	3,708,601	4,363,031	4,370,244	661,643	7,213	17.8	0.2
50 STATES, D.C. & P.R.	3,703,033	4,355,421	4,361,312	658,279	5,891	17.8	0.1

THE FIGURES REPRESENT CHILDREN 0-20 YEARS OLD SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND CHILDREN 3-21 YEARS OLD SERVED UNDER EHA-B.

DATA AS OF OCTOBER 1, 1985.

Table EA8

NUMBER AND CHANGE IN NUMBER OF CHILDREN SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND EHA-B

LEARNING DISABLED

STATE	NUMBER SERVED 1976-77	NUMBER SERVED 1984-85	NUMBER SERVED 1985-86	CHANGE IN NUMBER SERVED 1976-77 - 1985-86	CHANGE IN NUMBER SERVED 1984-85 - 1985-86	PERCENT CHANGE IN NUMBER SERVED 1976-77 - 1985-86	PERCENT CHANGE IN NUMBER SERVED 1984-85 - 1985-86
ALABAMA	5,436	26,043	27,751	22,315	1,708	410.5	6.6
ALASKA	3,927	6,597	6,938	3,011	341	76.7	5.2
ARIZONA	17,214	26,027	26,866	9,652	839	56.1	3.2
ARKANSAS	5,072	21,476	21,875	16,803	399	331.3	1.9
CALIFORNIA	74,404	204,795	211,940	137,536	7,145	184.9	3.5
COLORADO	16,661	20,695	21,569	4,908	874	29.5	4.2
CONNECTICUT	19,201	29,876	29,690	10,489	-186	54.6	-0.6
DELAWARE	4,392	7,416	7,623	3,231	207	73.6	2.8
DISTRICT OF COLUMBIA	1,661	3,106	3,044	1,383	-62	83.3	-2.0
FLORIDA	31,850	61,082	64,436	32,586	3,354	102.3	5.5
GEORGIA	15,744	31,824	23,237	7,493	-8,587	47.6	-27.0
HAWAII	4,880	7,391	6,992	2,112	-399	43.3	-5.4
IDAHO	5,604	8,417	9,181	3,577	764	63.8	9.1
ILLINOIS	53,328	96,133	99,091	45,763	2,958	85.8	3.1
INDIANA	5,422	32,110	33,846	28,424	1,736	524.2	5.4
IOWA	17,553	22,045	21,676	4,123	-369	23.5	-1.7
KANSAS	8,425	16,481	16,242	7,817	-239	92.8	-1.5
KENTUCKY	7,423	21,974	21,875	14,452	-99	194.7	-0.5
LOUISIANA	10,823	37,054	33,261	22,438	-3,793	207.3	-10.2
MAINE	7,261	9,764	9,903	2,642	139	36.4	1.4
MARYLAND	29,093	46,687	44,444	15,351	-2,243	52.8	-4.8
MASSACHUSETTS	18,542	49,463	49,450	30,908	-13	166.7	0.0
MICHIGAN	28,143	61,996	63,890	35,747	1,894	127.0	3.1
MINNESOTA	21,456	36,652	37,181	15,725	529	73.3	1.4
MISSISSIPPI	2,748	20,512	22,476	19,728	1,964	717.9	9.6
MISSOURI	22,862	39,342	40,727	17,865	1,385	78.1	3.5
MONTANA	2,883	7,644	7,599	4,716	-45	163.6	-0.6
NEBRASKA	5,433	12,094	12,163	6,730	69	123.9	0.6
NEVADA	4,782	7,825	7,782	3,000	-43	62.7	-0.5
NEW HAMPSHIRE	3,091	9,082	9,409	6,318	327	204.4	3.6
NEW JERSEY	33,188	68,594	71,700	38,512	3,106	116.0	4.5
NEW MEXICO	6,175	11,094	12,342	6,167	1,248	99.9	11.2
NEW YORK	34,514	131,188	143,461	108,947	12,273	315.7	9.4
NORTH CAROLINA	17,697	52,528	47,733	30,036	-4,795	169.7	-9.1
NORTH DAKOTA	2,439	5,131	5,080	2,641	-51	108.3	-1.0
OHIO	32,399	73,056	73,548	41,149	492	127.0	0.7
OKLAHOMA	15,015	27,941	27,823	12,808	-118	85.3	-0.4
OREGON	11,146	25,047	25,175	14,029	128	125.9	0.5
PENNSYLVANIA	19,772	69,771	74,204	54,432	4,433	275.3	6.4
PUERTO RICO	1,012	3,974	6,209	5,197	2,235	513.5	56.2
RHODE ISLAND	4,620	12,135	12,463	7,843	328	169.8	2.7
SOUTH CAROLINA	10,821	23,272	23,607	12,786	335	118.2	1.4
SOUTH DAKOTA	1,196	4,035	4,903	3,707	868	309.9	21.5
TENNESSEE	35,243	43,273	43,477	8,234	204	23.4	0.5
TEXAS	50,890	154,478	153,535	102,645	-943	201.7	-0.6
UTAH	13,584	14,439	14,798	1,214	359	8.9	2.5
VERMONT	2,026	3,793	4,128	2,102	335	103.8	8.8
VIRGINIA	16,211	43,886	45,079	28,868	1,193	178.1	2.7
WASHINGTON	10,129	34,327	33,920	23,791	-407	234.9	-1.2
WEST VIRGINIA	5,743	17,235	18,107	12,364	872	215.3	5.1
WISCONSIN	14,378	29,622	29,717	15,339	95	106.7	0.3
WYOMING	3,084	5,152	5,281	2,197	129	71.2	2.5
AMERICAN SAMOA	37	0	0	-37	0	-100.0	0.0
GUAM	148	652	705	557	53	376.4	8.1
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	269	-	-	-	-	-	-
VIRGIN ISLANDS	176	9	282	106	273	60.2	3,033.3
BUR. OF INDIAN AFFAIRS	-	3,057	2,905	-	-152	-	-5.0
U.S. & INSULAR AREAS	797,226	1,839,292	1,872,339	1,075,113	33,047	134.9	1.8
50 STATES, D.C. & P.R.	796,596	1,835,574	1,868,447	1,071,851	32,873	134.6	1.8

THE FIGURES REPRESENT CHILDREN 0-20 YEARS OLD SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND CHILDREN 3-21 YEARS OLD SERVED UNDER EHA-B.

DATA AS OF OCTOBER 1, 1985.

Table EA8

NUMBER AND CHANGE IN NUMBER OF CHILDREN SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND EHA-B

SPEECH IMPAIRED

	NUMBER SERVED			CHANGE IN NUMBER SERVED		PERCENT CHANGE IN NUMBER SERVED	
STATE	1976-77	1984-85	1985-86	1976-77 - 1985-86	1984-85 - 1985-86	1976-77 - 1985-86	1984-85 - 1985-86
ALABAMA	14,096	19,420	19,992	5,896	572	41.8	2.9
ALASKA	1,844	3,041	3,197	1,353	156	73.4	5.1
ARIZONA	11,379	11,558	11,461	82	-97	0.7	-0.8
ARKANSAS	7,182	9,749	9,205	2,023	-544	28.2	-5.6
CALIFORNIA	127,817	92,257	95,572	-32,245	3,315	-25.2	3.6
COLORADO	13,169	8,021	8,136	-5,033	115	-38.2	1.4
CONNECTICUT	16,518	13,004	13,278	-3,240	274	-19.6	2.1
DELAWARE	3,395	1,944	1,883	-1,512	-61	-44.5	-3.1
DISTRICT OF COLUMBIA	2,498	1,786	1,526	-972	-260	-38.9	-14.6
FLORIDA	37,253	50,879	54,190	16,937	3,311	45.5	6.5
GEORGIA	23,322	24,499	21,596	-1,726	-2,903	-7.4	-11.8
HAWAII	2,452	2,308	2,287	-165	-21	-6.7	-0.9
IDAHO	3,282	4,507	4,074	792	-433	24.1	-9.6
ILLINOIS	80,274	72,357	71,573	-8,701	-784	-10.8	-1.1
INDIANA	48,759	40,919	39,757	-9,002	-1,162	-18.5	-2.8
IOWA	17,475	14,227	13,627	-3,848	-600	-22.0	-4.2
KANSAS	15,501	11,982	11,851	-3,650	-131	-23.5	-1.1
KENTUCKY	21,541	25,940	25,910	4,369	-30	20.3	-0.1
LOUISIANA	44,028	21,734	21,475	-22,553	-259	-51.2	-1.2
MAINE	5,973	6,601	6,823	850	222	14.2	3.4
MARYLAND	30,284	25,388	25,547	-4,737	159	-15.6	0.6
MASSACHUSETTS	35,077	32,443	32,766	-2,311	323	-6.6	1.0
MICHIGAN	67,464	43,154	42,641	-24,823	-513	-36.8	-1.2
MINNESOTA	26,692	19,091	18,759	-7,933	-332	-29.7	-1.7
MISSISSIPPI	9,616	17,233	17,362	7,746	129	80.6	0.7
MISSOURI	36,296	29,730	29,735	-6,561	5	-18.1	0.0
MONTANA	2,491	4,875	4,552	2,061	-323	82.7	-6.6
NEBRASKA	10,331	9,051	9,098	-1,233	47	-11.9	0.5
NEVADA	3,127	3,183	3,157	30	-26	1.0	-0.8
NEW HAMPSHIRE	1,338	2,928	3,095	1,757	167	131.3	5.7
NEW JERSEY	68,945	60,492	61,092	-7,853	600	-11.4	1.0
NEW MEXICO	2,058	8,544	9,401	7,343	857	356.8	10.0
NEW YORK	61,549	36,939	36,937	-24,612	-2	-40.0	0.0
NORTH CAROLINA	26,913	27,261	27,036	123	-225	0.5	-0.8
NORTH DAKOTA	3,923	3,960	3,979	56	19	1.4	0.5
OHIO	58,867	56,483	54,904	-3,963	-1,579	-6.7	-2.8
OKLAHOMA	14,136	20,606	20,855	6,719	249	47.5	1.2
OREGON	10,802	11,952	11,087	285	-865	2.6	-7.2
PENNSYLVANIA	99,213	59,834	59,895	-39,318	61	-39.6	0.1
PUERTO RICO	219	1,764	1,760	1,541	-4	703.7	-0.2
RHODE ISLAND	5,217	3,105	3,259	-1,958	154	-37.5	5.0
SOUTH CAROLINA	23,370	20,512	20,535	-2,835	23	-12.1	0.1
SOUTH DAKOTA	5,978	5,482	5,304	-674	-178	-11.3	-3.2
TENNESSEE	31,702	28,891	27,655	-4,047	-1,236	-12.8	-4.3
TEXAS	78,523	67,865	66,886	-11,637	-979	-14.8	-1.4
UTAH	6,632	8,587	8,522	1,890	-65	28.5	-0.8
VERMONT	1,765	3,049	3,228	1,463	179	82.9	5.9
VIRGINIA	29,693	30,052	29,517	-176	-535	-0.6	-1.8
WASHINGTON	24,655	14,392	14,651	-10,004	259	-40.6	1.8
WEST VIRGINIA	9,947	13,235	13,888	3,941	653	39.6	4.9
WISCONSIN	15,404	17,966	18,862	3,458	896	22.4	5.0
WYOMING	1,810	3,171	3,320	1,510	149	83.4	4.7
AMERICAN SAMOA	0	0	40	40	40	100.0	100.0
GUAM	481	216	177	-304	-39	-63.2	-18.1
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	77	-	-	-	-	-	-
VIRGIN ISLANDS	325	0	222	-103	222	-31.7	100.0
BUR. OF INDIAN AFFAIRS	-	1,250	1,334	-	84	-	6.7
U.S. & INSULAR AREAS	1,302,678	1,129,417	1,128,471	-174,207	-946	-13.4	-0.1
50 STATES, D.C. & P.R.	1,301,795	1,127,951	1,126,698	-175,097	-1,253	-13.5	-0.1

THE FIGURES REPRESENT CHILDREN 0-20 YEARS OLD SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND CHILDREN 3-21 YEARS OLD SERVED UNDER EHA-B.

DATA AS OF OCTOBER 1, 1985.

Table EA8

NUMBER AND CHANGE IN NUMBER OF CHILDREN SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND EHA-B

MENTALLY RETARDED

STATE	NUMBER SERVED 1976-77	NUMBER SERVED 1984-85	NUMBER SERVED 1985-86	CHANGE IN NUMBER SERVED 1976-77 - 1985-86	CHANGE IN NUMBER SERVED 1984-85 - 1985-86	PERCENT CHANGE IN NUMBER SERVED 1976-77 - 1985-86	PERCENT CHANGE IN NUMBER SERVED 1984-85 - 1985-86
ALABAMA	31,203	34,313	33,638	2,435	-675	7.8	-2.0
ALASKA	1,277	591	690	-587	99	-46.0	16.8
ARIZONA	8,608	5,666	5,572	-3,036	-94	-35.3	-1.7
ARKANSAS	14,674	14,329	13,703	-971	-626	-6.6	-4.4
CALIFORNIA	42,916	28,501	27,119	-15,797	-1,382	-36.8	-4.8
COLORADO	10,077	5,188	4,445	-5,632	-743	-55.9	-14.3
CONNECTICUT	10,132	5,611	5,266	-4,866	-345	-48.0	-6.1
DELAWARE	3,199	1,796	1,703	-1,496	-93	-46.8	-5.2
DISTRICT OF COLUMBIA	2,918	1,374	1,385	-1,533	11	-52.5	0.8
FLORIDA	34,311	27,317	26,587	-7,724	-730	-22.5	-2.7
GEORGIA	31,744	24,958	18,078	-13,666	-6,880	-43.1	-27.6
HAWAII	2,434	1,286	1,261	-1,173	-25	-48.2	-1.9
IDAHO	3,567	2,763	3,172	-395	409	-11.1	14.8
ILLINOIS	48,974	34,859	30,871	-18,103	-3,988	-37.0	-11.4
INDIANA	27,784	23,462	22,906	-4,878	-556	-17.6	-2.4
IOWA	12,663	12,286	12,111	-552	-175	-4.4	-1.4
KANSAS	8,665	6,190	6,133	-2,532	-57	-29.2	-0.9
KENTUCKY	22,872	20,119	19,416	-3,456	-703	-15.1	-3.5
LOUISIANA	24,547	12,755	11,957	-12,590	-798	-51.3	-6.3
MAINE	5,664	4,622	4,522	-1,142	-100	-20.2	-2.2
MARYLAND	17,523	7,317	7,287	-10,236	-30	-58.4	-0.4
MASSACHUSETTS	34,972	30,071	30,165	-4,807	94	-13.7	0.3
MICHIGAN	34,715	26,188	23,583	-11,132	-2,605	-32.1	-9.9
MINNESOTA	15,140	12,956	12,499	-2,641	-457	-17.4	-3.5
MISSISSIPPI	15,487	12,412	11,354	-4,133	-1,058	-26.7	-8.5
MISSOURI	25,304	18,353	17,639	-7,665	-714	-30.3	-3.9
MONTANA	2,114	1,549	1,372	-742	-177	-35.1	-11.4
NEBRASKA	7,557	5,098	4,929	-2,628	-169	-34.8	-3.3
NEVADA	1,586	953	987	-599	34	-37.8	3.6
NEW HAMPSHIRE	2,720	1,146	1,093	-1,627	-53	-59.8	-4.6
NEW JERSEY	22,394	10,064	8,800	-13,594	-1,264	-60.7	-12.6
NEW MEXICO	4,519	2,695	2,421	-2,098	-274	-46.4	-10.2
NEW YORK	55,582	33,009	31,073	-24,509	-1,936	-44.1	-5.9
NORTH CAROLINA	46,334	26,015	23,748	-22,586	-2,267	-48.7	-8.7
NORTH DAKOTA	1,974	1,823	1,787	-187	-36	-9.5	-2.0
OHIO	67,626	53,983	52,443	-15,183	-1,540	-22.5	-2.9
OKLAHOMA	12,753	12,025	11,898	-855	-127	-6.7	-1.1
OREGON	7,697	4,816	4,448	-3,249	-368	-42.2	-7.6
PENNSYLVANIA	56,461	43,350	43,444	-13,017	94	-23.1	0.2
PUERTO RICO	8,132	22,137	23,593	15,461	1,456	190.1	6.6
RHODE ISLAND	2,483	1,662	1,326	-1,157	-336	-46.6	-20.2
SOUTH CAROLINA	29,944	19,672	18,657	-11,287	-1,015	-37.7	-5.2
SOUTH DAKOTA	1,787	1,692	1,678	-109	-14	-6.1	-0.8
TENNESSEE	23,019	16,933	15,413	-7,606	-1,520	-33.0	-9.0
TEXAS	47,580	29,027	28,507	-19,073	-520	-40.1	-1.8
UTAH	5,117	3,650	3,702	-1,415	52	-27.7	1.4
VERMONT	2,133	2,378	2,161	28	-217	1.3	-9.1
VIRGINIA	22,359	14,766	15,214	-7,145	448	-32.0	3.0
WASHINGTON	11,684	8,783	8,733	-2,951	-50	-25.3	-0.6
WEST VIRGINIA	11,963	10,132	10,257	-1,706	125	-14.3	1.2
WISCONSIN	19,187	12,731	12,336	-6,851	-395	-35.7	-3.1
WYOMING	1,197	897	865	-332	-32	-27.7	-3.6
AMERICAN SAMOA	71	116	134	63	18	88.7	15.5
GUAM	739	834	748	9	-86	1.2	-10.3
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	526	-	-	-	-	-	-
VIRGIN ISLANDS	954	64	751	-203	687	-21.3	1,073.4
BUR. OF INDIAN AFFAIRS	-	502	497	-	-5	-	-1.0
U.S. & INSULAR AREAS	969,562	717,785	686,077	-283,485	-31,708	-29.2	-4.4
50 STATES, D.C. & P.R.	967,272	716,269	683,947	-283,325	-32,322	-29.3	-4.5

THE FIGURES REPRESENT CHILDREN 0-20 YEARS OLD SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND CHILDREN 3-21 YEARS OLD SERVED UNDER EHA-B.

DATA AS OF OCTOBER 1, 1985.

Table EA8

NUMBER AND CHANGE IN NUMBER OF CHILDREN SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND EHA-B

EMOTIONALLY DISTURBED

STATE	NUMBER SERVED			CHANGE IN NUMBER SERVED		PERCENT CHANGE IN NUMBER SERVED	
	1976-77	1984-85	1985-86	1976-77 - 1985-86	1984-85 - 1985-86	1976-77 - 1985-86	1984-85 - 1985-86
ALABAMA	917	5,468	5,903	4,986	435	543.7	8.0
ALASKA	335	307	328	-7	21	-2.1	6.8
ARIZONA	3,665	5,145	4,332	667	-813	18.2	-15.8
ARKANSAS	240	469	494	254	25	105.8	5.3
CALIFORNIA	21,990	9,090	9,612	-12,378	522	-56.3	5.7
COLORADO	4,844	8,217	8,479	3,635	262	75.0	3.2
CONNECTICUT	10,381	13,471	13,446	3,065	-25	29.5	-0.2
DELAWARE	2,753	3,023	3,020	267	-3	9.7	-0.1
DISTRICT OF COLUMBIA	1,086	741	792	-294	51	-27.1	6.9
FLORIDA	7,584	19,179	20,326	12,742	1,147	168.0	6.0
GEORGIA	9,077	17,641	15,224	6,147	-2,417	67.7	-13.7
HAWAII	158	444	500	342	56	216.5	12.6
IDAHO	581	548	597	16	49	2.8	8.9
ILLINOIS	31,157	31,166	29,960	-1,197	-1,206	-3.8	-3.9
INDIANA	1,400	3,373	3,638	2,238	265	159.9	7.9
IOWA	1,757	5,945	6,079	4,322	134	246.0	2.3
KANSAS	1,980	4,193	4,527	2,547	334	128.6	8.0
KENTUCKY	1,534	2,666	2,653	1,119	-13	72.9	-0.5
LOUISIANA	3,499	3,994	3,996	497	2	14.2	0.1
MAINE	2,904	4,128	4,441	1,537	313	52.9	7.6
MARYLAND	3,787	4,055	3,999	212	-56	5.6	-1.4
MASSACHUSETTS	24,467	19,393	19,428	-5,039	35	-20.6	0.2
MICHIGAN	13,224	22,203	21,869	8,645	-334	65.4	-1.5
MINNESOTA	4,403	7,777	8,896	4,493	1,119	102.0	14.4
MISSISSIPPI	50	401	338	288	-63	576.0	-15.7
MISSOURI	5,359	7,511	7,772	2,413	261	45.0	3.5
MONTANA	317	697	662	345	-35	108.8	-5.0
NEBRASKA	977	2,362	2,368	1,391	6	142.4	0.3
NEVADA	548	915	981	433	66	79.0	7.2
NEW HAMPSHIRE	686	1,298	1,390	704	92	102.6	7.1
NEW JERSEY	11,758	14,720	14,453	2,695	-267	22.9	-1.8
NEW MEXICO	1,278	2,791	3,037	1,759	246	137.6	8.8
NEW YORK	46,948	45,403	46,767	-181	1,364	-0.4	3.0
NORTH CAROLINA	2,462	7,013	7,317	4,855	304	197.2	4.3
NORTH DAKOTA	206	389	407	201	18	97.6	4.6
OHIO	1,940	7,037	7,088	5,148	51	265.4	0.7
OKLAHOMA	462	1,123	1,215	753	92	163.0	8.2
OREGON	2,439	2,811	2,611	172	-200	7.1	-7.1
PENNSYLVANIA	9,791	16,601	17,635	7,844	1,034	80.1	6.2
PUERTO RICO	376	1,284	1,375	999	91	265.7	7.1
RHODE ISLAND	1,248	1,217	1,265	17	48	1.4	3.9
SOUTH CAROLINA	4,058	6,081	6,220	2,162	139	53.3	2.3
SOUTH DAKOTA	149	517	604	455	87	305.4	16.8
TENNESSEE	2,482	2,872	2,520	38	-352	1.5	-12.3
TEXAS	9,731	19,898	21,145	11,414	1,247	117.3	6.3
UTAH	10,280	11,894	11,392	1,112	-502	10.8	-4.2
VERMONT	127	406	489	362	83	285.0	20.4
VIRGINIA	3,689	7,521	7,313	3,624	-208	98.2	-2.8
WASHINGTON	5,891	3,659	3,886	-2,005	227	-34.0	6.2
WEST VIRGINIA	635	1,992	2,224	1,589	232	250.2	11.6
WISCONSIN	4,836	10,863	11,318	6,482	455	134.0	4.2
WYOMING	447	972	258	-189	-714	-42.3	-73.5
AMERICAN SAMOA	0	0	1	1	1	100.0	100.0
GUAM	23	55	65	42	10	182.6	18.2
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	95	-	-	-	-	-	-
VIRGIN ISLANDS	76	11	44	-32	33	-42.1	300.0
BUR. OF INDIAN AFFAIRS	-	257	244	-	-13	-	-5.1
U.S. & INSULAR AREAS	283,087	373,207	376,943	93,856	3,736	33.2	1.0
50 STATES, D.C. & P.R.	282,893	372,884	376,589	93,696	3,705	33.1	1.0

THE FIGURES REPRESENT CHILDREN 0-20 YEARS OLD SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND CHILDREN 3-21 YEARS OLD SERVED UNDER EHA-B.

DATA AS OF OCTOBER 1, 1985.

Table EA8

NUMBER AND CHANGE IN NUMBER OF CHILDREN SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND EHA-B

HARD OF HEARING & DEAF

STATE	NUMBER SERVED 1976-77	 1984-85	 1985-86	CHANGE IN NUMBER SERVED 1976-77 - 1985-86	 1984-85 - 1985-86	PERCENT CHANGE IN NUMBER SERVED 1976-77 - 1985-86	 1984-85 - 1985-86
ALABAMA	924	1,174	1,140	216	-34	23.4	-2.9
ALASKA	482	165	190	-292	25	-60.6	15.2
ARIZONA	907	1,130	1,025	118	-105	13.0	-9.3
ARKANSAS	515	609	603	88	-6	17.1	-1.0
CALIFORNIA	7,124	7,159	7,347	223	188	3.1	2.6
COLORADO	1,181	932	893	-288	-39	-24.4	-4.2
CONNECTICUT	1,890	867	847	-1,043	-20	-55.2	-2.3
DELAWARE	168	271	289	121	18	72.0	6.6
DISTRICT OF COLUMBIA	278	69	42	-236	-27	-84.9	-39.1
FLORIDA	2,163	2,037	1,802	-361	-235	-16.7	-11.5
GEORGIA	2,249	1,547	927	-1,322	-620	-58.8	-40.1
HAWAII	335	283	235	-100	-48	-29.9	-17.0
IDAHO	421	413	361	-60	-52	-14.3	-12.6
ILLINOIS	4,349	3,737	3,587	-762	-150	-17.5	-4.0
INDIANA	1,660	1,261	1,220	-440	-41	-26.5	-3.3
IOWA	915	964	905	-10	-59	-1.1	-6.1
KANSAS	1,981	663	650	-1,331	-13	-67.2	-2.0
KENTUCKY	1,256	914	836	-420	-78	-33.4	-8.5
LOUISIANA	1,378	1,675	1,680	302	5	21.9	0.3
MAINE	593	502	443	-150	-59	-25.3	-11.8
MARYLAND	1,627	1,438	1,419	-208	-19	-12.8	-1.3
MASSACHUSETTS	6,738	1,933	1,955	-4,783	22	-71.0	1.1
MICHIGAN	3,101	2,952	2,762	-339	-190	-10.9	-6.4
MINNESOTA	1,574	1,492	1,504	-70	12	-4.4	0.8
MISSISSIPPI	801	580	558	-243	-22	-30.3	-3.8
MISSOURI	1,465	960	881	-584	-79	-39.9	-8.2
MONTANA	361	261	269	-92	8	-25.5	3.1
NEBRASKA	474	451	465	-9	14	-1.9	3.1
NEVADA	204	132	149	-55	17	-27.0	12.9
NEW HAMPSHIRE	432	270	233	-199	-37	-46.1	-13.7
NEW JERSEY	2,794	1,662	1,636	-1,158	-26	-41.4	-1.6
NEW MEXICO	422	404	414	-8	10	-1.9	2.5
NEW YORK	5,893	5,180	4,531	-1,362	-649	-23.1	-12.5
NORTH CAROLINA	2,336	2,076	2,096	-240	20	-10.3	1.0
NORTH DAKOTA	205	197	178	-27	-19	-13.2	-9.6
OHIO	2,779	2,518	2,473	-306	-45	-11.0	-1.8
OKLAHOMA	816	878	866	50	-12	6.1	-1.4
OREGON	1,265	1,339	1,207	-58	-132	-4.6	-9.9
PENNSYLVANIA	5,453	3,653	3,616	-1,837	-37	-33.7	-1.0
PUERTO RICO	991	2,439	2,717	1,726	278	174.2	11.4
RHODE ISLAND	356	223	216	-140	-7	-39.3	-3.1
SOUTH CAROLINA	1,613	1,126	1,028	-585	-98	-36.3	-8.7
SOUTH DAKOTA	248	255	185	-63	-70	-25.4	-27.5
TENNESSEE	2,176	1,759	1,630	-546	-129	-25.1	-7.3
TEXAS	6,421	4,967	4,846	-1,575	-121	-24.5	-2.4
UTAH	746	841	840	94	-1	12.6	-0.1
VERMONT	138	187	199	61	12	44.2	6.4
VIRGINIA	1,797	1,540	1,337	-460	-203	-25.6	-13.2
WASHINGTON	2,359	1,363	1,384	-975	21	-41.3	1.5
WEST VIRGINIA	576	466	469	-107	3	-18.6	0.6
WISCONSIN	1,267	1,102	1,028	-239	-74	-18.9	-6.7
WYOMING	185	144	187	2	43	1.1	29.9
AMERICAN SAMOA	24	0	10	-14	10	-58.3	100.0
GUAM	1,164	37	37	-1,127	0	-96.8	0.0
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	71	-	-	-	-	-	-
VIRGIN ISLANDS	117	2	43	-74	41	-63.2	2,050.0
BUR. OF INDIAN AFFAIRS	-	31	23	-	-8	-	-25.8
U.S. & INSULAR AREAS	89,758	71,230	68,413	-21,345	-2,817	-23.8	-4.0
50 STATES, D.C. & P.R.	88,382	71,160	68,300	-20,082	-2,860	-22.7	-4.0

THE FIGURES REPRESENT CHILDREN 0-20 YEARS OLD SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND CHILDREN 3-21 YEARS OLD SERVED UNDER EHA-B.

DATA AS OF OCTOBER 1, 1985.

Table EA8

NUMBER AND CHANGE IN NUMBER OF CHILDREN SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND EHA-B

MULTIHANDICAPPED

STATE	NUMBER SERVED 1976-77	NUMBER SERVED 1984-85	NUMBER SERVED 1985-86	CHANGE IN NUMBER SERVED 1976-77 - 1985-86	CHANGE IN NUMBER SERVED 1984-85 - 1985-86	PERCENT CHANGE IN NUMBER SERVED 1976-77 - 1985-86	PERCENT CHANGE IN NUMBER SERVED 1984-85 - 1985-86
ALABAMA	-	962	1,011	-	49	-	5.1
ALASKA	-	234	268	-	34	-	14.5
ARIZONA	-	927	1,003	-	76	-	8.2
ARKANSAS	-	609	570	-	-39	-	-6.4
CALIFORNIA	-	5,558	5,162	-	-396	-	-7.1
COLORADO	-	2,374	3,055	-	681	-	28.7
CONNECTICUT	-	637	1,007	-	370	-	58.1
DELAWARE	-	43	211	-	168	-	390.7
DISTRICT OF COLUMBIA	-	86	62	-	-24	-	-27.9
FLORIDA	-	0	117	-	117	-	100.0
GEORGIA	-	71	12,898	-	12,827	-	18,066.2
HAWAII	-	221	205	-	-16	-	-7.2
IDAHO	-	390	481	-	91	-	23.3
ILLINOIS	-	0	0	-	0	-	0.0
INDIANA	-	1,496	1,432	-	-64	-	-4.3
IOWA	-	688	697	-	9	-	1.3
KANSAS	-	636	624	-	-12	-	-1.9
KENTUCKY	-	1,452	1,327	-	-125	-	-8.6
LOUISIANA	-	1,199	1,251	-	52	-	4.3
MAINE	-	745	777	-	32	-	4.3
MARYLAND	-	3,113	3,711	-	598	-	19.2
MASSACHUSETTS	-	3,084	3,106	-	22	-	0.7
MICHIGAN	-	144	1,690	-	1,546	-	1,073.6
MINNESOTA	-	5	0	-	-5	-	-100.0
MISSISSIPPI	-	325	298	-	-27	-	-8.3
MISSOURI	-	755	640	-	-115	-	-15.2
MONTANA	-	426	367	-	-59	-	-13.8
NEBRASKA	-	429	604	-	175	-	40.8
NEVADA	-	483	547	-	64	-	13.3
NEW HAMPSHIRE	-	224	300	-	76	-	33.9
NEW JERSEY	-	8,409	9,292	-	883	-	10.5
NEW MEXICO	-	916	809	-	-107	-	-11.7
NEW YORK	-	10,623	11,758	-	1,135	-	10.7
NORTH CAROLINA	-	1,781	1,812	-	31	-	1.7
NORTH DAKOTA	-	0	0	-	0	-	0.0
OHIO	-	3,463	3,832	-	369	-	10.7
OKLAHOMA	-	1,474	1,466	-	-8	-	-0.5
OREGON	-	148	0	-	-148	-	-100.0
PENNSYLVANIA	-	0	0	-	0	-	0.0
PUERTO RICO	-	2,920	2,975	-	55	-	1.9
RHODE ISLAND	-	102	90	-	-12	-	-11.8
SOUTH CAROLINA	-	456	701	-	245	-	53.7
SOUTH DAKOTA	-	621	530	-	-91	-	-14.7
TENNESSEE	-	1,789	1,739	-	-50	-	-2.8
TEXAS	-	4,092	3,980	-	-112	-	-2.7
UTAH	-	1,400	1,464	-	64	-	4.6
VERMONT	-	161	172	-	11	-	6.8
VIRGINIA	-	2,774	1,903	-	-871	-	-31.4
WASHINGTON	-	1,916	2,134	-	218	-	11.4
WEST VIRGINIA	-	175	206	-	31	-	17.7
WISCONSIN	-	783	821	-	38	-	4.9
WYOMING	-	112	126	-	14	-	12.5
AMERICAN SAMOA	-	0	10	-	10	-	100.0
GUAM	-	128	117	-	-11	-	-8.6
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	26	51	-	25	-	96.2
BUR. OF INDIAN AFFAIRS	-	195	292	-	97	-	49.7
U.S. & INSULAR AREAS	-	71,780	89,701	-	17,921	-	25.0
50 STATES, D.C. & P.R.	-	71,431	89,231	-	17,800	-	24.9

THE FIGURES REPRESENT CHILDREN 0-20 YEARS OLD SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND CHILDREN 3-21 YEARS OLD SERVED UNDER EHA-B.

DATA AS OF OCTOBER 1, 1985.

Table EA8

NUMBER AND CHANGE IN NUMBER OF CHILDREN SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND EHA-B

ORTHOPEDICALLY IMPAIRED

STATE	NUMBER SERVED 1976-77	NUMBER SERVED 1984-85	NUMBER SERVED 1985-86	CHANGE IN NUMBER SERVED 1976-77 - 1985-86	CHANGE IN NUMBER SERVED 1984-85 - 1985-86	PERCENT CHANGE IN NUMBER SERVED 1976-77 - 1985-86	PERCENT CHANGE IN NUMBER SERVED 1984-85 - 1985-86
ALABAMA	602	471	508	-94	37	-15.6	7.9
ALASKA	104	218	155	51	-63	49.0	-28.9
ARIZONA	460	672	550	90	-122	19.6	-18.2
ARKANSAS	255	310	349	94	39	36.9	12.6
CALIFORNIA	26,757	6,949	6,964	-19,793	15	-74.0	0.2
COLORADO	1,580	964	971	-609	7	-38.5	0.7
CONNECTICUT	984	324	329	-655	5	-66.6	1.5
DELAWARE	303	285	361	58	76	19.1	26.7
DISTRICT OF COLUMBIA	194	74	65	-129	-9	-66.5	-12.2
FLORIDA	2,042	2,060	2,227	185	167	9.1	8.1
GEORGIA	692	842	501	-191	-341	-27.6	-40.5
HAWAII	194	364	373	179	9	92.3	2.5
IDAHO	611	393	503	-108	110	-17.7	28.0
ILLINOIS	3,451	4,209	4,156	705	-53	20.4	-1.3
INDIANA	837	734	782	-55	48	-6.6	6.5
IOWA	452	1,044	1,097	645	53	142.7	5.1
KANSAS	310	550	585	275	27	88.7	4.8
KENTUCKY	451	601	534	83	-67	18.4	-11.1
LOUISIANA	586	841	1,004	418	163	71.3	19.4
MAINE	378	422	411	33	-11	8.7	-2.6
MARYLAND	881	820	806	-75	-14	-8.5	-1.7
MASSACHUSETTS	5,905	1,504	1,538	-4,367	34	-74.0	2.3
MICHIGAN	3,772	4,524	4,024	252	-500	6.7	-11.1
MINNESOTA	939	1,378	1,371	432	-7	46.0	-0.5
MISSISSIPPI	140	367	458	318	91	227.1	24.8
MISSOURI	1,066	833	818	-248	-15	-23.3	-1.8
MONTANA	82	121	139	57	18	69.5	14.9
NEBRASKA	273	612	662	389	50	142.5	8.2
NEVADA	178	250	241	63	-9	35.4	-3.6
NEW HAMPSHIRE	241	143	157	-84	14	-34.9	9.8
NEW JERSEY	1,977	919	997	-980	78	-49.6	8.5
NEW MEXICO	450	370	429	-21	59	-4.7	15.9
NEW YORK	5,786	3,967	3,477	-2,309	-490	-39.9	-12.4
NORTH CAROLINA	943	1,008	1,029	86	21	9.1	2.1
NORTH DAKOTA	81	228	233	152	5	187.7	2.2
OHIO	2,729	3,645	3,707	978	62	35.8	1.7
OKLAHOMA	512	441	393	-119	-48	-23.2	-10.9
OREGON	850	829	846	-4	17	-0.5	2.1
PENNSYLVANIA	3,125	2,008	1,997	-1,128	-11	-36.1	-0.5
PUERTO RICO	210	2,358	2,407	2,197	49	1,046.2	2.1
RHODE ISLAND	181	229	222	41	-7	22.7	-3.1
SOUTH CAROLINA	923	786	711	-212	-75	-23.0	-9.5
SOUTH DAKOTA	207	244	214	7	-30	3.4	-12.3
TENNESSEE	1,297	1,063	981	-316	-82	-24.4	-7.7
TEXAS	8,091	4,085	4,263	-3,828	178	-47.3	4.4
UTAH	291	370	354	63	-16	21.6	-4.3
VERMONT	18	108	114	96	6	533.3	5.6
VIRGINIA	997	632	1,012	15	380	1.5	60.1
WASHINGTON	1,667	1,182	1,251	-416	69	-25.0	5.8
WEST VIRGINIA	490	346	422	-68	76	-13.9	22.0
WISCONSIN	1,331	852	1,010	-321	158	-24.1	18.5
WYOMING	97	204	209	112	5	115.5	2.5
AMERICAN SAMOA	0	0	4	4	4	100.0	100.0
GUAM	2	36	44	42	8	2,100.0	22.2
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	4	-	-	-	-	-	-
VIRGIN ISLANDS	42	7	1	-41	-6	-97.6	-85.7
BUR. OF INDIAN AFFAIRS	-	31	34	-	3	-	9.7
U.S. & INSULAR AREAS	87,021	58,835	59,000	-28,021	165	-32.2	0.3
50 STATES, D.C. & P.R.	86,973	58,761	58,917	-28,056	156	-32.3	0.3

THE FIGURES REPRESENT CHILDREN 0-20 YEARS OLD SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND CHILDREN 3-21 YEARS OLD SERVED UNDER EHA-B.

DATA AS OF OCTOBER 1, 1985.

Table EA8

NUMBER AND CHANGE IN NUMBER OF CHILDREN SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND EHA-B

OTHER HEALTH IMPAIRED

STATE	NUMBER SERVED 1976-77	NUMBER SERVED 1984-85	NUMBER SERVED 1985-86	CHANGE IN NUMBER SERVED 1976-77 - 1985-86	CHANGE IN NUMBER SERVED 1984-85 - 1985-86	PERCENT CHANGE IN NUMBER SERVED 1976-77 - 1985-86	PERCENT CHANGE IN NUMBER SERVED 1984-85 - 1985-86
ALABAMA	435	595	652	217	57	49.9	9.6
ALASKA	1,547	144	83	-1,464	-61	-94.6	-42.4
ARIZONA	450	663	584	134	-79	29.8	-11.9
ARKANSAS	269	235	248	-21	13	-7.8	5.5
CALIFORNIA	28,164	12,442	12,544	-15,620	102	-55.5	0.8
COLORADO	8	0	0	-8	0	-100.0	0.0
CONNECTICUT	2,303	941	1,021	-1,282	80	-55.7	8.5
DELAWARE	19	79	54	35	-25	184.2	-31.6
DISTRICT OF COLUMBIA	506	91	96	-410	5	-81.0	5.5
FLORIDA	1,283	1,987	2,305	1,022	318	79.7	16.0
GEORGIA	1,553	463	291	-1,262	-172	-81.3	-37.1
HAWAII	48	13	9	-39	-4	-81.3	-30.8
IDAHO	140	511	575	435	64	310.7	12.5
ILLINOIS	6,635	1,746	1,721	-4,914	-25	-74.1	-1.4
INDIANA	1,134	255	284	-850	29	-75.0	11.4
IOWA	12	8	3	-9	-5	-75.0	-62.5
KANSAS	431	389	246	-185	-143	-42.9	-36.8
KENTUCKY	1,533	659	449	-1,084	-210	-70.7	-31.9
LOUISIANA	1,598	1,575	1,438	-160	-137	-10.0	-8.7
MAINE	706	495	396	-310	-99	-43.9	-20.0
MARYLAND	180	826	924	744	98	413.3	11.9
MASSACHUSETTS	3,807	2,048	2,085	-1,722	37	-45.2	1.8
MICHIGAN	1,382	247	493	-889	246	-64.3	99.6
MINNESOTA	1,363	820	845	-518	25	-38.0	3.0
MISSISSIPPI	203	1	5	-198	4	-97.5	400.0
MISSOURI	1,376	677	805	-571	128	-41.5	18.9
MONTANA	130	149	207	77	58	59.2	38.9
NEBRASKA	47	0	0	-47	0	-100.0	0.0
NEVADA	631	290	265	-366	-25	-58.0	-8.6
NEW HAMPSHIRE	1,135	278	266	-869	-12	-76.6	-4.3
NEW JERSEY	2,588	923	1,274	-1,314	351	-50.8	38.0
NEW MEXICO	51	1,245	551	500	-694	980.4	-55.7
NEW YORK	25,846	20,915	9,702	-16,144	-11,213	-62.5	-53.6
NORTH CAROLINA	503	1,317	1,510	1,007	193	200.2	14.7
NORTH DAKOTA	55	120	99	44	-21	80.0	-17.5
OHIO	801	0	0	-801	0	-100.0	0.0
OKLAHOMA	243	250	235	-8	-15	-3.3	-6.0
OREGON	2,530	557	673	-1,857	116	-73.4	20.8
PENNSYLVANIA	9,663	0	0	-9,663	0	-100.0	0.0
PUERTO RICO	86	1,118	1,156	1,070	38	1,244.2	3.4
RHODE ISLAND	1,740	271	217	-1,523	-54	-87.5	-19.9
SOUTH CAROLINA	671	181	198	-473	17	-70.5	9.4
SOUTH DAKOTA	311	50	93	-218	43	-70.1	86.0
TENNESSEE	2,343	1,647	1,172	-1,171	-475	-50.0	-28.8
TEXAS	30,747	8,212	7,963	-22,784	-249	-74.1	-3.0
UTAH	234	239	304	70	65	29.9	27.2
VERMONT	145	118	125	-20	7	-13.8	5.9
VIRGINIA	1,342	379	522	-820	143	-61.1	37.7
WASHINGTON	722	1,836	2,109	1,387	273	192.1	14.9
WEST VIRGINIA	429	269	523	94	254	21.9	94.4
WISCONSIN	1,043	478	429	-614	-49	-58.9	-10.3
WYOMING	252	328	334	82	6	32.5	1.8
AMERICAN SAMOA	3	0	0	-3	0	-100.0	0.0
GUAM	26	5	8	-18	3	-69.2	60.0
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	31	-	-	-	-	-	-
VIRGIN ISLANDS	0	5	0	0	-5	0.0	-100.0
BUR. OF INDIAN AFFAIRS	-	28	51	-	23	-	82.1
U.S. & INSULAR AREAS	141,433	69,118	58,142	-83,291	-10,976	-58.9	-15.9
50 STATES, D.C. & P.R.	141,373	69,080	58,083	-83,290	-10,997	-58.9	-15.9

THE FIGURES REPRESENT CHILDREN 0-20 YEARS OLD SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND CHILDREN 3-21 YEARS OLD SERVED UNDER EHA-B.

DATA AS OF OCTOBER 1, 1985.

Table EA8

NUMBER AND CHANGE IN NUMBER OF CHILDREN SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND EHA-B

VISUALLY HANDICAPPED

STATE	NUMBER SERVED 1976-77	1984-85	1985-86	CHANGE IN NUMBER SERVED 1976-77 - 1985-86	1984-85 - 1985-86	PERCENT CHANGE IN NUMBER SERVED 1976-77 - 1985-86	1984-85 - 1985-86
ALABAMA	376	478	469	93	-9	24.7	-1.9
ALASKA	83	51	44	-39	-7	-47.0	-13.7
ARIZONA	365	410	412	47	2	12.9	0.5
ARKANSAS	281	246	265	-16	19	-5.7	7.7
CALIFORNIA	3,121	2,227	2,448	-673	221	-21.6	9.9
COLORADO	425	325	318	-107	-7	-25.2	-2.2
CONNECTICUT	677	743	531	-146	-212	-21.6	-28.5
DELAWARE	80	127	141	61	14	76.2	11.0
DISTRICT OF COLUMBIA	122	32	26	-96	-6	-78.7	-18.8
FLORIDA	774	714	801	27	87	3.5	12.2
GEORGIA	831	577	513	-318	-64	-38.3	-11.1
HAWAII	46	76	74	28	-2	60.9	-2.6
IDAHO	369	173	212	-157	39	-42.5	22.5
ILLINOIS	1,631	1,333	1,284	-347	-49	-21.3	-3.7
INDIANA	650	567	545	-105	-22	-16.2	-3.9
IOWA	230	242	247	17	5	7.4	2.1
KANSAS	331	258	263	-68	5	-20.5	1.9
KENTUCKY	449	528	543	94	15	20.9	2.8
LOUISIANA	532	518	531	-1	13	-0.2	2.5
MAINE	224	169	119	-105	-50	-46.9	-29.6
MARYLAND	810	762	777	-33	15	-4.1	2.0
MASSACHUSETTS	2,485	878	883	-1,602	5	-64.5	0.6
MICHIGAN	1,314	909	910	-404	1	-30.7	0.1
MINNESOTA	570	417	408	-162	-9	-28.4	-2.2
MISSISSIPPI	175	209	214	39	5	22.3	2.4
MISSOURI	661	325	283	-378	-42	-57.2	-12.9
MONTANA	234	174	180	-54	6	-23.1	3.4
NEBRASKA	180	174	164	-16	-10	-8.9	-5.7
NEVADA	79	56	64	-15	8	-19.0	14.3
NEW HAMPSHIRE	275	191	114	-161	-77	-58.5	-40.3
NEW JERSEY	1,435	1,169	1,162	-273	-7	-19.0	-0.6
NEW MEXICO	197	123	139	-58	16	-29.4	13.0
NEW YORK	4,134	1,960	1,683	-2,451	-277	-59.3	-14.1
NORTH CAROLINA	850	661	618	-232	-43	-27.3	-6.5
NORTH DAKOTA	94	66	64	-30	-2	-31.9	-3.0
OHIO	1,174	966	953	-221	-13	-18.8	-1.3
OKLAHOMA	246	311	274	28	-37	11.4	-11.9
OREGON	503	596	459	-44	-137	-8.7	-23.0
PENNSYLVANIA	3,316	1,553	1,551	-1,765	-2	-53.2	-0.1
PUERTO RICO	177	2,246	2,316	2,139	70	1,208.5	3.1
RHODE ISLAND	127	89	86	-41	-3	-32.3	-3.4
SOUTH CAROLINA	959	519	478	-481	-41	-50.2	-7.9
SOUTH DAKOTA	63	84	60	-3	-24	-4.8	-28.6
TENNESSEE	992	698	769	-223	71	-22.5	10.2
TEXAS	1,571	2,085	2,201	630	116	40.1	5.6
UTAH	321	352	391	70	39	21.8	11.1
VERMONT	32	52	43	11	-9	34.4	-17.3
VIRGINIA	1,528	1,780	868	-660	-912	-43.2	-51.2
WASHINGTON	949	360	334	-615	-26	-64.8	-7.2
WEST VIRGINIA	353	288	297	-56	9	-15.9	3.1
WISCONSIN	575	431	393	-182	-38	-31.7	-8.8
WYOMING	191	55	68	-123	13	-64.4	23.6
AMERICAN SAMOA	4	0	0	-4	0	-100.0	0.0
GUAM	16	27	18	2	-9	12.5	-33.3
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	48	-	-	-	-	-	-
VIRGIN ISLANDS	22	2	10	-12	8	-54.5	400.0
BUR. OF INDIAN AFFAIRS	-	13	8	-	-5	-	-38.5
U.S. & INSULAR AREAS	38,257	30,375	29,026	-9,231	-1,349	-24.1	-4.4
50 STATES, D.C. & P.R.	38,167	30,333	28,990	-9,177	-1,343	-24.0	-4.4

THE FIGURES REPRESENT CHILDREN 0-20 YEARS OLD SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND CHILDREN 3-21 YEARS OLD SERVED UNDER EHA-B.

DATA AS OF OCTOBER 1, 1985.

Table EA8

NUMBER AND CHANGE IN NUMBER OF CHILDREN SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND EHA-B

DEAF-BLIND

STATE	NUMBER SERVED 1976-77	 1984-85	 1985-86	CHANGE IN NUMBER SERVED 1976-77 - 1985-86	 1984-85 - 1985-86	PERCENT CHANGE IN NUMBER SERVED 1976-77 - 1985-86	 1984-85 - 1985-86
ALABAMA	-	52	43	-	-9	-	-17.3
ALASKA	-	12	2	-	-10	-	-83.3
ARIZONA	-	0	0	-	0	-	0.0
ARKANSAS	-	11	10	-	-1	-	-9.1
CALIFORNIA	-	164	180	-	16	-	9.8
COLORADO	-	89	87	-	-2	-	-2.2
CONNECTICUT	-	4	11	-	7	-	175.0
DELAWARE	-	34	37	-	3	-	8.8
DISTRICT OF COLUMBIA	-	35	31	-	-4	-	-11.4
FLORIDA	-	47	30	-	-17	-	-36.2
GEORGIA	-	26	30	-	4	-	15.4
HAWAII	-	8	11	-	3	-	37.5
IDAHO	-	29	3	-	-26	-	-89.7
ILLINOIS	-	107	90	-	-17	-	-15.9
INDIANA	-	6	7	-	1	-	16.7
IOWA	-	51	34	-	-17	-	-33.3
KANSAS	-	69	55	-	-14	-	-20.3
KENTUCKY	-	48	17	-	-31	-	-64.6
LOUISIANA	-	34	35	-	1	-	2.9
MAINE	-	4	10	-	6	-	150.0
MARYLAND	-	56	127	-	71	-	126.8
MASSACHUSETTS	-	73	72	-	-1	-	-1.4
MICHIGAN	-	0	0	-	0	-	0.0
MINNESOTA	-	52	25	-	-27	-	-51.9
MISSISSIPPI	-	28	21	-	-7	-	-25.0
MISSOURI	-	84	78	-	-6	-	-7.1
MONTANA	-	34	29	-	-5	-	-14.7
NEBRASKA	-	2	0	-	-2	-	-100.0
NEVADA	-	0	5	-	5	-	100.0
NEW HAMPSHIRE	-	1	14	-	13	-	1,300.0
NEW JERSEY	-	30	106	-	76	-	253.3
NEW MEXICO	-	6	13	-	7	-	116.7
NEW YORK	-	136	194	-	58	-	42.6
NORTH CAROLINA	-	28	35	-	7	-	25.0
NORTH DAKOTA	-	27	23	-	-4	-	-14.8
OHIO	-	18	8	-	-10	-	-55.6
OKLAHOMA	-	44	56	-	12	-	27.3
OREGON	-	58	69	-	11	-	19.0
PENNSYLVANIA	-	9	15	-	6	-	66.7
PUERTO RICO	-	87	112	-	25	-	28.7
RHODE ISLAND	-	12	8	-	-4	-	-33.3
SOUTH CAROLINA	-	5	22	-	17	-	340.0
SOUTH DAKOTA	-	28	58	-	30	-	107.1
TENNESSEE	-	29	24	-	-5	-	-17.2
TEXAS	-	121	92	-	-29	-	-24.0
UTAH	-	37	24	-	-13	-	-35.1
VERMONT	-	4	6	-	2	-	50.0
VIRGINIA	-	44	49	-	5	-	11.4
WASHINGTON	-	41	49	-	8	-	19.5
WEST VIRGINIA	-	15	16	-	1	-	6.7
WISCONSIN	-	33	31	-	-2	-	-6.1
WYOMING	-	6	6	-	0	-	0.0
AMERICAN SAMOA	-	0	2	-	2	-	100.0
GUAM	-	5	10	-	5	-	100.0
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	9	10	-	1	-	11.1
BUR. OF INDIAN AFFAIRS	-	0	0	-	0	-	0.0
U.S. & INSULAR AREAS	-	1,992	2,132	-	140	-	7.0
50 STATES, D.C. & P.R.	-	1,978	2,110	-	132	-	6.7

THE FIGURES REPRESENT CHILDREN 0-20 YEARS OLD SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND CHILDREN 3-21 YEARS OLD SERVED UNDER EHA-B.

DATA AS OF OCTOBER 1, 1985.

Table EA9

PERCENT OF CHILDREN SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND EHA-B BY HANDICAPPING CONDITION

DURING SCHOOL YEAR 1985-1986

STATE	ALL CONDITIONS	LEARNING DISABLED	SPEECH IMPAIRED	MENTALLY RETARDED	EMOTIONALLY DISTURBED	HARD OF HEARING & DEAF	MULTI-HANDI-CAPPED	ORTHO-PEDICALLY IMPAIRED	OTHER HEALTH IMPAIRED	VISUALLY HANDI-CAPPED	DEAF-BLIND
ALABAMA	12.72	3.88	2.79	4.70	0.82	0.16	0.14	0.07	0.09	0.07	0.01
ALASKA	11.22	6.55	3.02	0.65	0.31	0.18	0.25	0.15	0.08	0.04	0.00
ARIZONA	10.20	5.29	2.26	1.10	0.05	0.20	0.20	0.11	0.11	0.08	0.00
ARKANSAS	10.93	5.05	2.13	3.10	0.11	0.14	0.13	0.08	0.06	0.06	0.00
CALIFORNIA	9.14	5.11	2.31	0.65	0.23	0.18	0.12	0.17	0.30	0.06	0.00
COLORADO	8.73	3.93	1.48	0.81	1.54	0.16	0.56	0.18	0.00	0.08	0.02
CONNECTICUT	14.07	6.38	2.86	1.13	2.89	0.18	0.22	0.07	0.22	0.11	0.00
DELAWARE	16.13	8.02	1.98	1.79	3.10	0.30	0.22	0.38	0.06	0.15	0.04
DISTRICT OF COLUMBIA	8.13	3.50	1.75	1.59	0.91	0.05	0.07	0.07	0.11	0.03	0.04
FLORIDA	11.43	4.26	3.58	1.76	1.34	0.12	0.01	0.15	0.15	0.05	0.00
GEORGIA	8.90	2.22	2.06	1.73	1.45	0.09	1.23	0.05	0.03	0.05	0.00
HAWAII	7.28	4.26	1.39	0.77	0.30	0.14	0.13	0.23	0.01	0.05	0.01
IDAHO	9.12	4.37	1.94	1.51	0.28	0.17	0.23	0.24	0.27	0.10	0.00
ILLINOIS	12.58	5.14	3.72	1.60	1.56	0.19	0.00	0.22	0.09	0.07	0.00
INDIANA	10.71	3.47	4.08	2.35	0.37	0.13	0.15	0.08	0.03	0.06	0.00
IOWA	11.50	4.41	2.78	2.47	1.24	0.18	0.14	0.22	0.00	0.05	0.01
KANSAS	10.07	3.97	2.90	1.50	1.11	0.16	0.15	0.14	0.06	0.06	0.01
KENTUCKY	11.44	3.40	4.03	3.02	0.41	0.13	0.21	0.08	0.07	0.08	0.00
LOUISIANA	9.75	4.23	2.73	1.52	0.51	0.21	0.16	0.13	0.18	0.07	0.00
MAINE	13.45	4.78	3.30	2.18	2.15	0.21	0.38	0.20	0.19	0.06	0.00
MARYLAND	13.21	6.59	3.79	1.88	0.59	0.21	0.55	0.12	0.14	0.12	0.02
MASSACHUSETTS	16.76	5.86	3.88	3.57	2.30	0.23	0.37	0.18	0.25	0.10	0.01
MICHIGAN	9.55	3.77	2.52	1.39	1.29	0.16	0.10	0.24	0.03	0.05	0.00
MINNESOTA	11.66	5.32	2.68	1.79	1.27	0.22	0.00	0.20	0.12	0.06	0.00
MISSISSIPPI	11.42	4.83	3.73	2.44	0.87	0.12	0.06	0.10	0.08	0.05	0.00
MISSOURI	12.58	5.16	3.76	2.23	0.98	0.11	0.08	0.10	0.10	0.04	0.01
MONTANA	9.92	4.90	2.94	0.89	0.43	0.17	0.24	0.09	0.13	0.12	0.02
NEBRASKA	11.41	4.56	3.41	1.85	0.89	0.17	0.23	0.25	0.00	0.06	0.00
NEVADA	9.33	5.12	2.08	0.65	0.65	0.10	0.36	0.16	0.17	0.04	0.00
NEW HAMPSHIRE	10.24	5.99	1.97	0.70	0.89	0.15	0.19	0.10	0.17	0.07	0.01
NEW JERSEY	15.25	6.41	5.46	0.79	1.29	0.15	0.83	0.09	0.11	0.10	0.01
NEW MEXICO	10.87	4.54	3.46	0.89	1.12	0.15	0.38	0.16	0.20	0.05	0.00
NEW YORK	11.08	5.49	1.41	1.19	1.79	0.17	0.45	0.13	0.37	0.06	0.01
NORTH CAROLINA	10.42	4.40	2.49	2.19	0.68	0.19	0.17	0.09	0.14	0.06	0.00
NORTH DAKOTA	10.13	4.34	3.40	1.53	0.35	0.15	0.00	0.20	0.08	0.05	0.02
OHIO	10.78	3.98	2.97	2.04	0.38	0.13	0.21	0.20	0.00	0.05	0.00
OKLAHOMA	10.79	4.01	3.46	1.97	0.20	0.14	0.24	0.07	0.04	0.05	0.01
OREGON	10.47	5.06	2.49	1.00	0.59	0.27	0.00	0.19	0.15	0.10	0.02
PENNSYLVANIA	11.94	4.38	3.53	2.56	1.04	0.21	0.00	0.12	0.00	0.09	0.00
PUERTO RICO	–	–	–	–	–	–	–	–	–	–	–
RHODE ISLAND	14.51	9.44	2.47	1.00	0.96	0.16	0.07	0.17	0.16	0.07	0.01
SOUTH CAROLINA	11.89	3.89	3.38	3.07	1.02	0.17	0.12	0.12	0.03	0.08	0.00
SOUTH DAKOTA	11.08	3.99	4.31	1.36	0.49	0.15	0.43	0.17	0.08	0.05	0.05
TENNESSEE	11.65	5.31	3.38	1.88	0.31	0.20	0.21	0.12	0.14	0.09	0.00
TEXAS	9.53	4.98	2.17	0.93	0.69	0.16	0.13	0.14	0.26	0.07	0.00
UTAH	10.37	3.07	2.11	0.92	2.83	0.21	0.36	0.09	0.08	0.10	0.01
VERMONT	11.98	4.04	3.03	2.43	0.55	0.22	0.19	0.13	0.14	0.05	0.01
VIRGINIA	10.75	4.72	3.09	1.59	0.76	0.14	0.20	0.11	0.05	0.09	0.01
WASHINGTON	9.26	4.59	1.98	1.18	0.53	0.19	0.29	0.17	0.29	0.05	0.01
WEST VIRGINIA	12.51	4.88	3.74	2.70	0.60	0.13	0.06	0.11	0.14	0.08	0.00
WISCONSIN	9.98	3.90	2.48	1.02	1.49	0.14	0.11	0.13	0.06	0.05	0.00
WYOMING	10.24	5.08	3.19	0.83	0.25	0.18	0.12	0.20	0.32	0.07	0.01
AMERICAN SAMOA	–	–	–	–	–	–	–	–	–	–	–
GUAM	–	–	–	–	–	–	–	–	–	–	–
NORTHERN MARIANAS	–	–	–	–	–	–	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–	–	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–	–	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	–	–	–	–	–	–	–	–	–	–	–
50 STATES, AND D.C.	10.97	4.73	2.86	1.68	0.95	0.17	0.22	0.14	0.14	0.07	0.01

THE FIGURES REPRESENT CHILDREN 0-20 YEARS OLD SERVED UNDER CHAPTER 1 OF ECIA (SOP) AND CHILDREN 3-21 YEARS OLD SERVED UNDER EHA-B.

NUMBER OF CHILDREN SERVED IS A PERCENT OF THE STUDENTS ENROLLED IN FALL, 1985 (PRE-KINDERGARTEN - GRADE 12).

STATE ENROLLMENTS ARE ESTIMATED BY THE CENTER FOR EDUCATIONAL STATISTICS.

DATA AS OF OCTOBER 1, 1986.

Table EA10

NUMBER OF CHILDREN 0-2 YEARS OLD RECEIVING SPECIAL EDUCATION AND RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

STATE	NUMBER OF CHILDREN
ALABAMA	2,004
ALASKA	957
ARIZONA	192
ARKANSAS	379
CALIFORNIA	1,898
COLORADO	689
CONNECTICUT	239
DELAWARE	45
DISTRICT OF COLUMBIA	0
FLORIDA	859
GEORGIA	167
HAWAII	0
IDAHO	845
ILLINOIS	202
INDIANA	1,156
IOWA	802
KANSAS	246
KENTUCKY	821
LOUISIANA	966
MAINE	282
MARYLAND	911
MASSACHUSETTS	2,479
MICHIGAN	1,833
MINNESOTA	520
MISSISSIPPI	36
MISSOURI	88
MONTANA	74
NEBRASKA	981
NEVADA	296
NEW HAMPSHIRE	0
NEW JERSEY	2,866
NEW MEXICO	250
NEW YORK	3,133
NORTH CAROLINA	246
NORTH DAKOTA	205
OHIO	115
OKLAHOMA	481
OREGON	47
PENNSYLVANIA	3,428
PUERTO RICO	-
RHODE ISLAND	222
SOUTH CAROLINA	258
SOUTH DAKOTA	208
TENNESSEE	215
TEXAS	1,872
UTAH	116
VERMONT	88
VIRGINIA	519
WASHINGTON	388
WEST VIRGINIA	427
WISCONSIN	1,395
WYOMING	48
AMERICAN SAMOA	-
GUAM	27
NORTHERN MARIANAS	-
TRUST TERRITORIES	-
VIRGIN ISLANDS	-
BUR. OF INDIAN AFFAIRS	32
U.S. & INSULAR AREAS	36,553
50 STATES, D.C. & P.R.	36,494

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 – 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

ALL CONDITIONS

STATE	PSYCHOLOGICAL SERVICES	SCHOOL SOCIAL WORK SERVICES	OCCUPATIONAL THERAPY	SPEECH/ LANGUAGE PATHOLOGY	AUDIOLOGICAL SERVICES	RECREATIONAL SERVICES	DIAGNOSTIC SERVICES	PHYSICAL THERAPY
ALABAMA	4,637	1,741	1,105	6,164	649	2,671	–	984
ALASKA	2,493	45	491	1,755	1,036	7	1,990	572
ARIZONA	25,787	7,801	2,615	9,102	10,377	3,075	15,863	1,340
ARKANSAS	4,104	1,705	700	4,412	4,424	834	7,436	497
CALIFORNIA	–	–	–	–	–	–	–	–
COLORADO	33,259	30,666	3,903	5,962	1,003	518	1,804	3,903
CONNECTICUT	9,303	4,419	2,031	3,996	3,532	583	14,124	735
DELAWARE	2,967	585	988	2,520	596	489	2,573	514
DISTRICT OF COLUMBIA	1,704	1,469	204	1,949	39	304	308	125
FLORIDA	39,861	5,888	4,856	18,591	7,676	–	27,444	2,090
GEORGIA	22,147	9,116	1,635	10,801	3,979	2,520	7,665	1,673
HAWAII	–	–	1,090	2,103	272	0	7,460	734
IDAHO	1,898	584	182	2,398	0	114	76	361
ILLINOIS	27,866	30,573	6,455	38,510	2,610	1,945	80,751	4,805
INDIANA	24,486	11,047	2,837	10,662	8,459	4,680	3,226	2,798
IOWA	590	870	1,460	9,605	1,405	–	36,715	970
KANSAS	9,824	3,630	2,092	6,105	6,896	1,398	9,408	1,171
KENTUCKY	20,894	5,969	1,274	7,255	7,488	5,095	12,650	1,812
LOUISIANA	2,653	10,940	2,893	16,828	3,654	2,030	18,596	1,893
MAINE	21,584	13,234	9,829	9,478	3,729	355	22,444	3,144
MARYLAND	23,824	6,739	3,743	4,959	4,110	1,246	23,119	2,454
MASSACHUSETTS	18,201	132,851	4,384	109,602	1,861	132,848	132,851	4,384
MICHIGAN	35,353	4,480	11,344	23,686	35,863	0	1,019	6,045
MINNESOTA	30,615	31,000	2,730	–	3,370	–	13,315	2,290
MISSISSIPPI	4,756	1,549	171	5,050	917	1,946	8,909	289
MISSOURI	3,135	432	2,663	14,463	1,541	1,986	14,758	2,288
MONTANA	425	42	150	2,084	10	0	0	112
NEBRASKA	6,995	–	338	13,611	–	–	6,925	783
NEVADA	4,461	224	91	1,775	1,578	185	890	388
NEW HAMPSHIRE	–	7	1,888	2,492	34	12	51	289
NEW JERSEY	7,224	7,224	5,082	22,391	109	161,763	15,665	5,757
NEW MEXICO	990	–	2,360	4,531	313	53	13,342	1,257
NEW YORK	143,350	90,992	13,009	83,004	5,251	46,457	18,328	31,975
NORTH CAROLINA	27,565	7,424	4,041	14,984	11,420	5,375	37,194	3,777
NORTH DAKOTA	1,418	984	707	–	400	–	–	478
OHIO	40,037	645	3,985	20,805	7,875	331	30,540	3,366
OKLAHOMA	1,378	1,743	1,425	17,181	3,687	1,350	21,212	5,033
OREGON	2,252	496	1,255	3,076	433	57	49	778
PENNSYLVANIA	80,031	28,024	9,313	31,135	8,559	10,399	46,400	6,893
PUERTO RICO	331	6,652	858	1,663	–	3,621	2,299	516
RHODE ISLAND	432	250	308	2,694	–	–	–	274
SOUTH CAROLINA	16,603	15,576	1,315	9,623	5,965	4,475	15,017	1,687
SOUTH DAKOTA	103	96	442	2,030	193	0	0	406
TENNESSEE	–	–	428	2,098	465	–	32,274	913
TEXAS	7,426	4,855	10,440	54,065	2,903	1,613	8,243	6,663
UTAH	11,062	6,195	1,767	7,364	10,658	1,669	12,995	1,352
VERMONT	190	0	317	1,757	133	419	28	254
VIRGINIA	33,519	33,519	2,552	12,862	3,953	1,718	33,519	2,224
WASHINGTON	11,069	–	2,330	10,950	7,186	1,884	8,830	1,989
WEST VIRGINIA	1,969	425	500	4,635	1,147	532	1,363	839
WISCONSIN	–	–	2,567	11,208	–	–	–	2,416
WYOMING	1,233	1,150	818	1,581	550	614	2,771	284
AMERICAN SAMOA	–	–	–	–	–	–	–	–
GUAM	–	–	–	–	–	–	–	–
NORTHERN MARIANAS	–	–	–	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	589	370	1,069	1,606	50	718	2,364	328
U.S. & INSULAR AREAS	772,633	524,146	141,030	667,161	188,358	407,809	774,803	128,982
50 STATES, D.C. & P.R.	772,044	523,776	139,961	665,555	188,308	407,091	772,439	128,574

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 – 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

ALL CONDITIONS

STATE	TRANSPORTATION SERVICES	SCHOOL HEALTH SERVICES	COUNSELING SERVICES	OTHER RELATED SERVICES
ALABAMA	4,165	1,169	4,177	1
ALASKA	1,454	525	1,790	129
ARIZONA	10,100	22,828	7,938	1,308
ARKANSAS	3,822	5,293	1,865	199
CALIFORNIA	–	–	–	109,165
COLORADO	3,879	30,666	0	–
CONNECTICUT	3,842	981	2,824	20
DELAWARE	907	869	1,498	434
DISTRICT OF COLUMBIA	2,551	6,555	1,058	51
FLORIDA	42,939	12,111	63,367	3,075
GEORGIA	12,480	4,696	5,471	2,372
HAWAII	1,961	0	224	–
IDAHO	53	73	60	0
ILLINOIS	54,886	15,675	20,435	33,201
INDIANA	25,771	23,814	10,138	0
IOWA	9,298	640	625	3,000
KANSAS	8,467	4,643	2,835	902
KENTUCKY	9,515	9,191	9,936	1,500
LOUISIANA	9,693	4,698	2,282	1,289
MAINE	22,444	20,801	11,457	–
MARYLAND	11,920	5,263	4,424	51
MASSACHUSETTS	132,851	132,851	132,851	0
MICHIGAN	26,658	7,640	0	0
MINNESOTA	9,245	1,960	15,350	–
MISSISSIPPI	5,023	4,480	1,516	191
MISSOURI	29,546	6,934	5,534	1,501
MONTANA	1,694	12	29	0
NEBRASKA	5,867	–	–	–
NEVADA	2,152	3,428	1,445	0
NEW HAMPSHIRE	645	43	2,161	1,909
NEW JERSEY	55,056	5,536	9,569	0
NEW MEXICO	–	–	–	55
NEW YORK	120,194	16,506	20,220	8,609
NORTH CAROLINA	21,492	15,619	24,020	2,614
NORTH DAKOTA	1,643	–	–	1,002
OHIO	38,526	18,324	15,176	5,413
OKLAHOMA	9,191	2,555	4,375	0
OREGON	4,732	441	1,801	103
PENNSYLVANIA	87,507	72,681	28,425	3,653
PUERTO RICO	8,238	461	1,351	1,989
RHODE ISLAND	3,949	–	129	–
SOUTH CAROLINA	12,360	9,541	20,170	475
SOUTH DAKOTA	9,227	0	0	45
TENNESSEE	14,223	–	–	–
TEXAS	35,679	5,473	26,177	11,979
UTAH	8,106	7,161	3,287	150
VERMONT	779	61	331	336
VIRGINIA	100,605	10,605	12,953	0
WASHINGTON	15,404	–	–	5,708
WEST VIRGINIA	3,252	952	997	634
WISCONSIN	–	–	–	–
WYOMING	743	2,249	886	438
AMERICAN SAMOA	–	–	–	–
GUAM	–	–	–	–
NORTHERN MARIANAS	–	–	–	–
TRUST TERRITORIES	–	–	–	–
VIRGIN ISLANDS	–	–	–	–
BUR. OF INDIAN AFFAIRS	294	2,820	1,813	3
U.S. & INSULAR AREAS	1,007,020	498,824	482,970	203,504
50 STATES, D.C. & P.R.	1,006,726	496,004	481,157	203,501

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

LEARNING DISABLED

STATE	PSYCHOLOGICAL SERVICES	SCHOOL SOCIAL WORK SERVICES	OCCUPATIONAL THERAPY	SPEECH/ LANGUAGE PATHOLOGY	AUDIOLOGICAL SERVICES	RECREATIONAL SERVICES	DIAGNOSTIC SERVICES	PHYSICAL THERAPY
ALABAMA	1,410	271	167	1,009	153	506	-	76
ALASKA	1,918	22	99	1,065	412	3	1,049	232
ARIZONA	13,039	3,576	689	3,537	3,545	967	7,342	157
ARKANSAS	1,824	333	59	1,189	2,143	21	3,073	30
CALIFORNIA	-	-	-	-	-	-	-	-
COLORADO	12,684	12,684	15	4,923	0	3	10	15
CONNECTICUT	5,424	3,440	367	2,344	415	2	6,544	52
DELAWARE	1,417	106	384	1,273	267	28	1,242	42
DISTRICT OF COLUMBIA	109	105	26	901	1	3	32	1
FLORIDA	13,932	464	314	7,084	566	-	9,426	21
GEORGIA	8,418	754	158	2,940	608	50	1,840	86
HAWAII	-	-	465	1,150	0	0	5,011	134
IDAHO	978	164	1	753	0	1	1	34
ILLINOIS	11,633	12,425	1,370	18,292	192	480	32,138	360
INDIANA	11,730	2,409	222	2,721	1,259	711	430	142
IOWA	110	190	155	2,530	20	-	14,450	20
KANSAS	4,053	1,255	330	2,228	1,686	112	3,723	92
KENTUCKY	8,265	1,567	242	2,248	1,584	968	3,091	45
LOUISIANA	371	5,261	246	7,551	461	41	8,337	93
MAINE	8,833	6,047	5,364	5,067	41	35	8,834	0
MARYLAND	17,922	5,184	555	2,830	805	10	10,477	111
MASSACHUSETTS	0	46,897	0	46,897	0	46,897	46,897	0
MICHIGAN	18,176	604	1,213	4,315	0	0	0	0
MINNESOTA	19,050	19,200	0	-	0	-	860	0
MISSISSIPPI	1,719	461	13	2,256	105	677	3,098	3
MISSOURI	813	5	357	4,866	298	167	5,531	19
MONTANA	210	16	60	1,089	0	0	0	8
NEBRASKA	4,095	-	-	-	-	-	4,095	-
NEVADA	3,411	0	9	1,305	523	0	678	32
NEW HAMPSHIRE	-	1	621	1,274	10	1	30	18
NEW JERSEY	4,531	4,531	705	9,690	0	68,538	9,650	0
NEW MEXICO	229	-	563	2,018	47	0	4,914	145
NEW YORK	59,277	39,402	0	50,529	0	0	1,311	0
NORTH CAROLINA	13,958	2,027	528	4,480	3,134	500	12,245	207
NORTH DAKOTA	693	250	93	-	44	-	-	28
OHIO	22,602	220	205	7,338	2,131	0	11,910	59
OKLAHOMA	0	0	0	11,165	892	30	9,305	0
OREGON	455	342	474	1,475	30	0	0	0
PENNSYLVANIA	37,829	9,194	2,572	9,782	176	5,381	14,307	1,041
PUERTO RICO	59	569	64	97	-	282	243	6
RHODE ISLAND	267	173	149	2,316	-	-	-	82
SOUTH CAROLINA	5,638	3,814	96	1,982	1,039	839	3,593	158
SOUTH DAKOTA	17	3	17	739	0	0	0	38
TENNESSEE	-	-	22	116	-	-	14,284	44
TEXAS	2,618	2,072	2,009	29,299	343	60	2,679	561
UTAH	2,797	1,775	164	3,558	3,831	21	4,599	1
VERMONT	45	0	44	589	8	17	3	16
VIRGINIA	14,623	14,623	581	5,463	424	747	14,623	57
WASHINGTON	8,230	-	254	3,495	3,764	15	5,362	120
WEST VIRGINIA	289	114	44	1,700	144	50	69	56
WISCONSIN	-	-	-	-	-	-	-	-
WYOMING	522	600	242	884	236	182	1,350	67
AMERICAN SAMOA	-	-	-	-	-	-	-	-
GUAM	-	-	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	397	166	730	953	30	291	981	4
U.S. & INSULAR AREAS	346,628	203,316	23,057	281,305	31,367	128,636	289,667	4,513
50 STATES, D.C. & P.R.	346,231	203,150	22,327	280,352	31,337	128,345	288,686	4,509

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

LEARNING DISABLED

STATE	TRANSPORTATION SERVICES	SCHOOL HEALTH SERVICES	COUNSELING SERVICES	OTHER RELATED SERVICES
ALABAMA	244	312	973	0
ALASKA	448	333	1,096	62
ARIZONA	3,282	10,938	3,556	148
ARKANSAS	876	1,914	657	35
CALIFORNIA	-	-	-	9,663
COLORADO	470	12,684	0	-
CONNECTICUT	1,390	30	163	0
DELAWARE	381	317	551	94
DISTRICT OF COLUMBIA	646	2,976	263	0
FLORIDA	14,372	3,685	24,193	0
GEORGIA	1,955	1,133	1,102	422
HAWAII	288	0	0	-
IDAHO	0	1	1	0
ILLINOIS	13,338	6,583	6,355	13,833
INDIANA	7,070	6,311	3,661	0
IOWA	1,260	0	60	340
KANSAS	2,824	1,442	987	234
KENTUCKY	1,156	1,775	3,030	383
LOUISIANA	2,166	672	404	27
MAINE	8,834	8,806	4,944	-
MARYLAND	1,735	45	257	1
MASSACHUSETTS	46,897	46,897	46,897	0
MICHIGAN	1,678	0	0	0
MINNESOTA	1,800	0	9,900	-
MISSISSIPPI	1,254	1,732	376	19
MISSOURI	10,323	2,570	2,241	65
MONTANA	0	0	23	0
NEBRASKA	-	-	-	-
NEVADA	600	2,097	717	0
NEW HAMPSHIRE	80	6	857	74
NEW JERSEY	37,011	2,820	2,055	0
NEW MEXICO	-	-	-	0
NEW YORK	54,895	5,247	10,030	3,932
NORTH CAROLINA	4,258	4,802	8,683	545
NORTH DAKOTA	231	-	-	282
OHIO	10,058	6,719	6,529	1,352
OKLAHOMA	4,187	36	1,481	0
OREGON	2,093	27	1,234	0
PENNSYLVANIA	33,282	25,556	11,458	109
PUERTO RICO	460	38	127	188
RHODE ISLAND	1,896	-	107	-
SOUTH CAROLINA	2,081	1,533	5,387	23
SOUTH DAKOTA	28	0	0	10
TENNESSEE	4,253	-	-	-
TEXAS	7,240	1,913	13,301	3,664
UTAH	1,816	2,627	847	39
VERMONT	77	8	63	38
VIRGINIA	43,874	4,643	6,347	0
WASHINGTON	4,959	-	-	2,972
WEST VIRGINIA	205	56	311	48
WISCONSIN	-	-	-	-
WYOMING	50	1,243	451	94
AMERICAN SAMOA	-	-	-	-
GUAM	-	-	-	-
NORTHERN MARIANAS	-	-	-	-
TRUST TERRITORIES	-	-	-	-
VIRGIN ISLANDS	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	1,552	1,390	0
U.S. & INSULAR AREAS	338,329	172,079	183,065	38,696
50 STATES, D.C. & P.R.	338,329	170,527	181,675	38,696

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

SPEECH IMPAIRED

STATE	PSYCHOLOGICAL SERVICES	SCHOOL SOCIAL WORK SERVICES	OCCUPATIONAL THERAPY	SPEECH/ LANGUAGE PATHOLOGY	AUDIOLOGICAL SERVICES	RECREATIONAL SERVICES	DIAGNOSTIC SERVICES	PHYSICAL THERAPY
ALABAMA	148	113	21	-	113	33	-	9
ALASKA	186	0	56	-	249	0	481	51
ARIZONA	5,383	1,305	315	-	3,566	987	4,278	90
ARKANSAS	533	292	15	-	844	97	1,477	8
CALIFORNIA	-	-	-	-	-	-	-	-
COLORADO	6,089	6,089	253	-	0	59	179	253
CONNECTICUT	187	77	181	-	1,770	4	5,882	45
DELAWARE	35	11	18	-	76	0	418	0
DISTRICT OF COLUMBIA	8	180	0	-	2	1	34	0
FLORIDA	11,570	60	13	-	3,719	-	11,215	0
GEORGIA	608	233	70	-	929	9	1,320	32
HAWAII	-	-	76	-	0	0	1,411	84
IDAHO	75	10	0	-	0	0	0	13
ILLINOIS	1,194	1,518	531	-	243	79	24,124	203
INDIANA	1,555	1,076	80	-	3,510	1,163	863	61
IOWA	50	20	5	-	0	-	7,695	5
KANSAS	1,252	183	315	-	1,671	95	2,166	139
KENTUCKY	1,712	663	51	-	3,319	677	4,225	41
LOUISIANA	60	1,240	146	-	1,242	8	3,460	27
MAINE	3,344	665	0	-	3,114	0	3,992	0
MARYLAND	265	117	290	-	1,995	15	8,991	87
MASSACHUSETTS	0	30,556	0	-	0	30,556	30,556	0
MICHIGAN	0	0	0	-	31,373	0	0	0
MINNESOTA	0	0	0	-	1,350	-	1,860	0
MISSISSIPPI	1,525	638	2	-	350	428	3,090	8
MISSOURI	274	0	194	-	250	199	4,139	117
MONTANA	23	0	17	-	1	0	0	3
NEBRASKA	65	-	-	-	-	-	65	-
NEVADA	133	0	11	-	678	0	89	9
NEW HAMPSHIRE	-	0	482	-	5	1	6	14
NEW JERSEY	129	129	0	-	6	60,483	333	0
NEW MEXICO	88	-	438	-	45	0	4,302	94
NEW YORK	16,453	10,922	0	-	0	0	9,394	0
NORTH CAROLINA	1,084	536	99	-	2,519	155	5,993	75
NORTH DAKOTA	129	54	106	-	65	-	-	42
OHIO	3,827	29	0	-	275	0	5,342	0
OKLAHOMA	45	0	0	-	1,800	0	6,370	0
OREGON	544	84	36	-	122	1	0	0
PENNSYLVANIA	10,666	2,985	51	-	778	1,476	7,614	35
PUERTO RICO	9	94	52	-	-	92	46	7
RHODE ISLAND	10	14	19	-	-	-	-	14
SOUTH CAROLINA	1,493	1,721	81	-	2,244	632	5,345	45
SOUTH DAKOTA	3	0	27	-	0	0	0	10
TENNESSEE	-	-	17	-	-	-	9,550	37
TEXAS	111	385	461	-	256	36	1,532	176
UTAH	743	671	112	-	3,171	13	2,715	2
VERMONT	11	0	54	-	9	25	4	39
VIRGINIA	10,015	10,015	84	-	1,580	511	10,015	0
WASHINGTON	284	-	134	-	1,643	0	254	149
WEST VIRGINIA	19	71	2	-	309	0	20	13
WISCONSIN	-	-	-	-	-	-	-	-
WYOMING	92	34	69	-	117	202	727	18
AMERICAN SAMOA	-	-	-	-	-	-	-	-
GUAM	-	-	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	61	0	-	10	0	949	0
U.S. & INSULAR AREAS	82,029	72,851	4,984	-	75,318	98,037	193,021	2,055
50 STATES, D.C. & P.R.	82,029	72,790	4,984	-	75,308	98,037	192,072	2,055

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

SPEECH IMPAIRED

STATE	TRANSPORTATION SERVICES	SCHOOL HEALTH SERVICES	COUNSELING SERVICES	OTHER RELATED SERVICES
ALABAMA	41	3	33	0
ALASKA	329	77	400	3
ARIZONA	1,605	5,929	934	116
ARKANSAS	572	1,101	263	48
CALIFORNIA	-	-	-	85,005
COLORADO	138	6,089	0	-
CONNECTICUT	265	30	5	1
DELAWARE	45	45	3	37
DISTRICT OF COLUMBIA	80	1,692	19	0
FLORIDA	14,008	2,736	25,227	0
GEORGIA	965	809	183	149
HAWAII	130	0	0	-
IDAHO	0	0	0	0
ILLINOIS	3,979	2,164	1,674	3,729
INDIANA	3,984	8,572	1,804	0
IOWA	175	0	0	0
KANSAS	798	939	85	69
KENTUCKY	1,055	3,155	2,181	390
LOUISIANA	692	319	189	33
MAINE	3,992	3,134	289	-
MARYLAND	645	77	19	2
MASSACHUSETTS	30,556	30,556	30,556	0
MICHIGAN	8,213	865	0	0
MINNESOTA	2,100	0	0	-
MISSISSIPPI	1,254	1,228	251	0
MISSOURI	5,132	2,070	491	89
MONTANA	0	2	0	0
NEBRASKA	-	-	-	-
NEVADA	272	230	218	0
NEW HAMPSHIRE	183	1	123	369
NEW JERSEY	0	0	0	0
NEW MEXICO	-	-	-	0
NEW YORK	15,237	1,445	632	1,091
NORTH CAROLINA	1,864	1,805	1,402	519
NORTH DAKOTA	268	-	-	16
OHIO	0	939	1,308	209
OKLAHOMA	0	0	319	0
OREGON	1,189	27	272	3
PENNSYLVANIA	16,334	21,293	7,586	7
PUERTO RICO	189	12	15	38
RHODE ISLAND	116	-	7	-
SOUTH CAROLINA	1,926	1,400	1,853	59
SOUTH DAKOTA	4,110	0	0	0
TENNESSEE	1,487	-	-	-
TEXAS	2,405	487	661	828
UTAH	800	1,413	298	1
VERMONT	113	6	114	8
VIRGINIA	30,049	3,164	1,066	0
WASHINGTON	1,061	-	-	269
WEST VIRGINIA	10	0	55	0
WISCONSIN	-	-	-	-
WYOMING	257	532	44	26
AMERICAN SAMOA	-	-	-	-
GUAM	-	-	-	-
NORTHERN MARIANAS	-	-	-	-
TRUST TERRITORIES	-	-	-	-
VIRGIN ISLANDS	-	-	-	-
BUR. OF INDIAN AFFAIRS	180	587	0	0
U.S. & INSULAR AREAS	150,871	105,093	80,659	93,914
50 STATES, D.C. & P.R.	150,691	104,506	80,659	93,914

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

MENTALLY RETARDED

STATE	PSYCHOLOGICAL SERVICES	SCHOOL SOCIAL WORK SERVICES	OCCUPATIONAL THERAPY	SPEECH/ LANGUAGE PATHOLOGY	AUDIOLOGICAL SERVICES	RECREATIONAL SERVICES	DIAGNOSTIC SERVICES	PHYSICAL THERAPY
ALABAMA	2,186	934	373	4,010	121	1,222	-	292
ALASKA	121	4	95	345	141	0	114	86
ARIZONA	2,416	1,095	673	3,044	843	301	1,428	381
ARKANSAS	1,087	587	290	2,315	883	278	2,212	214
CALIFORNIA	-	-	-	-	-	-	-	-
COLORADO	3,059	3,059	1,096	543	0	222	808	1,096
CONNECTICUT	1,841	225	477	567	283	151	711	181
DELAWARE	435	44	306	589	21	58	205	228
DISTRICT OF COLUMBIA	795	547	45	810	0	266	29	2
FLORIDA	6,176	875	2,244	7,788	820	-	3,756	925
GEORGIA	5,991	1,759	852	5,352	728	1,622	1,250	947
HAWAII	-	-	256	505	0	0	412	171
IDAHO	508	254	123	1,345	0	54	0	220
ILLINOIS	7,990	5,956	2,637	12,300	141	498	10,868	1,998
INDIANA	8,211	5,438	1,265	6,044	2,053	2,043	1,059	1,228
IOWA	50	180	420	5,125	25	-	8,355	240
KANSAS	1,487	470	532	2,387	1,611	560	1,218	418
KENTUCKY	7,039	2,403	466	3,517	1,861	2,842	4,161	693
LOUISIANA	875	1,642	863	5,474	799	758	3,510	597
MAINE	4,036	3,075	2,234	2,223	120	95	4,036	1,998
MARYLAND	2,791	344	727	784	339	199	1,066	420
MASSACHUSETTS	0	28,163	0	28,163	0	28,163	28,163	0
MICHIGAN	7,336	244	4,817	13,465	1,278	0	577	833
MINNESOTA	6,150	6,300	1,900	-	0	-	5,650	900
MISSISSIPPI	1,217	351	67	2,382	365	767	2,296	94
MISSOURI	655	14	816	7,295	149	441	2,630	668
MONTANA	18	4	19	583	1	0	0	16
NEBRASKA	1,460	-	-	-	-	-	1,460	-
NEVADA	256	104	12	279	199	81	74	211
NEW HAMPSHIRE	-	1	313	657	7	3	5	31
NEW JERSEY	940	940	237	4,176	0	7,895	1,880	1,385
NEW MEXICO	58	-	532	1,115	44	6	1,591	440
NEW YORK	14,751	10,500	10,763	10,552	0	10,763	1,587	8,154
NORTH CAROLINA	7,434	2,220	2,054	6,208	2,618	2,412	10,380	1,303
NORTH DAKOTA	322	361	289	-	58	-	-	241
OHIO	7,780	282	255	8,076	1,203	102	8,524	64
OKLAHOMA	60	250	325	4,595	0	499	3,829	3,507
OREGON	95	28	36	417	17	0	0	14
PENNSYLVANIA	17,576	4,707	4,407	12,779	955	1,606	5,735	3,820
PUERTO RICO	128	4,665	335	793	-	2,345	1,207	77
RHODE ISLAND	10	8	34	207	-	-	-	43
SOUTH CAROLINA	6,905	7,860	577	5,356	1,537	2,030	3,855	931
SOUTH DAKOTA	11	19	75	700	0	0	0	65
TENNESSEE	-	-	137	689	-	-	5,465	303
TEXAS	567	474	2,397	12,729	169	692	693	1,393
UTAH	1,138	626	512	1,179	786	758	1,423	457
VERMONT	28	0	85	905	8	290	6	69
VIRGINIA	4,875	4,875	568	4,126	386	247	4,875	290
WASHINGTON	1,269	-	553	2,958	971	628	1,285	195
WEST VIRGINIA	851	163	240	2,257	207	123	691	434
WISCONSIN	-	-	-	11,208	-	-	-	-
WYOMING	82	140	211	347	81	175	201	83
AMERICAN SAMOA	-	-	-	-	-	-	-	-
GUAM	-	-	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	70	58	102	389	5	45	182	110
U.S. & INSULAR AREAS	139,136	102,248	48,642	209,632	21,833	71,240	139,462	38,466
50 STATES, D.C. & P.R.	139,066	102,190	48,540	209,243	21,828	71,195	139,280	38,356

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

MENTALLY RETARDED

STATE	TRANSPORTATION SERVICES	SCHOOL HEALTH SERVICES	COUNSELING SERVICES	OTHER RELATED SERVICES
ALABAMA	2,214	314	1,899	1
ALASKA	245	21	89	19
ARIZONA	2,440	2,198	1,050	194
ARKANSAS	1,670	1,487	572	70
CALIFORNIA	-	-	-	858
COLORADO	1,345	3,059	0	-
CONNECTICUT	2,311	51	29	3
DELAWARE	85	68	140	38
DISTRICT OF COLUMBIA	1,032	1,062	153	0
FLORIDA	6,635	3,842	7,667	0
GEORGIA	5,462	1,914	833	1,141
HAWAII	583	0	0	-
IDAHO	0	13	0	0
ILLINOIS	17,538	4,737	3,514	6,198
INDIANA	10,388	6,038	3,262	0
IOWA	4,205	160	20	980
KANSAS	2,720	1,013	419	256
KENTUCKY	4,958	3,553	3,566	503
LOUISIANA	3,685	2,196	508	519
MAINE	4,036	3,873	2,519	-
MARYLAND	3,501	177	45	6
MASSACHUSETTS	28,163	28,163	28,163	0
MICHIGAN	7,914	4,011	0	0
MINNESOTA	3,200	1,050	0	-
MISSISSIPPI	2,011	1,291	670	134
MISSOURI	8,240	1,417	1,508	390
MONTANA	1,050	3	2	0
NEBRASKA	-	-	-	-
NEVADA	702	407	56	0
NEW HAMPSHIRE	148	1	138	122
NEW JERSEY	4,263	290	0	0
NEW MEXICO	-	-	-	0
NEW YORK	13,661	1,305	2,846	978
NORTH CAROLINA	10,068	5,095	6,043	654
NORTH DAKOTA	859	-	-	501
OHIO	20,403	5,383	4,806	2,255
OKLAHOMA	2,298	529	1,038	0
OREGON	190	22	93	66
PENNSYLVANIA	21,629	17,175	4,885	699
PUERTO RICO	5,906	302	991	1,321
RHODE ISLAND	1,028	-	3	-
SOUTH CAROLINA	5,235	2,448	3,497	196
SOUTH DAKOTA	1,044	0	0	4
TENNESSEE	4,988	-	-	-
TEXAS	11,571	1,127	1,740	2,175
UTAH	2,200	689	467	27
VERMONT	412	17	62	207
VIRGINIA	14,630	1,540	1,882	0
WASHINGTON	4,452	-	-	1,195
WEST VIRGINIA	1,897	477	343	381
WISCONSIN	-	-	-	-
WYOMING	228	124	40	166
AMERICAN SAMOA	-	-	-	-
GUAM	-	-	-	-
NORTHERN MARIANAS	-	-	-	-
TRUST TERRITORIES	-	-	-	-
VIRGIN ISLANDS	-	-	-	-
BUR. OF INDIAN AFFAIRS	31	292	170	0
U.S. & INSULAR AREAS	253,474	108,934	85,728	22,257
50 STATES, D.C. & P.R.	253,443	108,642	85,558	22,257

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

EMOTIONALLY DISTURBED

STATE	PSYCHOLOGICAL SERVICES	SCHOOL SOCIAL WORK SERVICES	OCCUPATIONAL THERAPY	SPEECH/ LANGUAGE PATHOLOGY	AUDIOLOGICAL SERVICES	RECREATIONAL SERVICES	DIAGNOSTIC SERVICES	PHYSICAL THERAPY
ALABAMA	688	324	135	301	12	220	-	42
ALASKA	126	1	36	33	25	0	168	13
ARIZONA	3,203	1,225	142	919	787	341	1,476	19
ARKANSAS	151	31	3	31	26	31	204	7
CALIFORNIA	-	-	-	-	-	-	-	-
COLORADO	8,208	5,615	35	329	0	9	26	35
CONNECTICUT	1,368	428	35	149	92	286	586	5
DELAWARE	949	400	65	263	66	258	630	3
DISTRICT OF COLUMBIA	651	429	0	135	0	0	38	0
FLORIDA	5,958	3,470	1,184	1,466	20	-	1,506	38
GEORGIA	6,662	5,926	140	1,552	393	519	2,948	69
HAWAII	-	-	24	95	0	0	172	8
IDAHO	275	149	6	47	0	59	75	4
ILLINOIS	6,404	9,721	346	3,854	29	820	9,954	96
INDIANA	1,613	656	61	344	232	170	192	25
IOWA	210	270	65	705	5	-	4,375	190
KANSAS	2,328	1,481	247	401	616	383	1,742	29
KENTUCKY	1,025	382	34	182	71	238	329	8
LOUISIANA	825	1,555	279	850	93	489	1,468	16
MAINE	3,442	2,902	1,111	1,065	0	58	3,442	0
MARYLAND	2,020	656	64	184	119	475	1,141	17
MASSACHUSETTS	18,201	18,201	0	0	0	18,201	18,201	0
MICHIGAN	6,665	3,425	0	0	0	0	0	0
MINNESOTA	5,415	5,500	0	-	0	-	1,550	0
MISSISSIPPI	121	23	2	65	7	9	107	4
MISSOURI	747	140	135	984	9	450	844	46
MONTANA	138	21	2	71	0	0	0	0
NEBRASKA	800	-	-	-	-	-	800	-
NEVADA	433	0	0	75	5	10	24	24
NEW HAMPSHIRE	-	4	67	92	1	0	3	0
NEW JERSEY	943	943	0	1,290	0	14,276	2,482	0
NEW MEXICO	558	-	157	406	10	47	1,173	44
NEW YORK	34,507	16,992	0	8,929	0	0	1,193	0
NORTH CAROLINA	2,674	1,406	94	611	533	554	2,140	65
NORTH DAKOTA	122	153	11	-	1	-	-	6
OHIO	2,305	70	28	250	98	0	1,180	0
OKLAHOMA	1,123	500	0	409	0	92	341	0
OREGON	1,079	20	33	342	15	12	0	0
PENNSYLVANIA	9,002	9,196	753	3,154	84	871	3,997	185
PUERTO RICO	91	278	57	77	-	173	70	5
RHODE ISLAND	132	45	5	58	-	-	-	3
SOUTH CAROLINA	2,197	1,243	59	501	216	369	1,525	55
SOUTH DAKOTA	57	61	7	39	0	0	0	0
TENNESSEE	-	-	25	133	-	-	840	56
TEXAS	3,414	1,136	518	2,773	104	553	1,116	130
UTAH	5,335	2,419	145	882	1,872	122	2,917	4
VERMONT	100	0	5	38	0	9	2	1
VIRGINIA	2,418	2,418	182	809	78	123	2,418	17
WASHINGTON	373	-	15	150	150	0	613	15
WEST VIRGINIA	539	68	2	161	43	106	355	35
WISCONSIN	-	-	-	-	-	-	-	-
WYOMING	432	282	48	62	18	33	250	10
AMERICAN SAMOA	-	-	-	-	-	-	-	-
GUAM	-	-	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	97	36	106	150	0	197	139	0
U.S. & INSULAR AREAS	146,124	100,201	6,468	35,416	5,830	40,563	74,752	1,329
50 STATES, D.C. & P.R.	146,027	100,165	6,362	35,266	5,830	40,366	74,613	1,329

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

EMOTIONALLY DISTURBED

STATE	TRANSPORTATION SERVICES	SCHOOL HEALTH SERVICES	COUNSELING SERVICES	OTHER RELATED SERVICES
ALABAMA	442	96	1,135	0
ALASKA	107	5	120	21
ARIZONA	1,016	1,825	1,429	54
ARKANSAS	128	47	93	5
CALIFORNIA	-	-	-	926
COLORADO	848	5,615	0	-
CONNECTICUT	1,113	217	2,518	12
DELAWARE	163	327	710	128
DISTRICT OF COLUMBIA	478	466	452	0
FLORIDA	5,249	1,163	3,562	2,808
GEORGIA	2,833	504	3,132	445
HAWAII	113	0	224	-
IDAHO	53	59	59	0
ILLINOIS	13,188	1,523	7,674	5,588
INDIANA	1,759	1,042	811	0
IOWA	2,490	270	535	1,050
KANSAS	1,226	804	1,239	240
KENTUCKY	690	114	790	49
LOUISIANA	867	247	856	42
MAINE	3,442	3,360	3,102	-
MARYLAND	2,095	367	3,898	31
MASSACHUSETTS	18,201	18,201	18,201	0
MICHIGAN	2,532	55	0	0
MINNESOTA	1,100	600	5,450	-
MISSISSIPPI	84	63	161	7
MISSOURI	2,233	135	863	190
MONTANA	0	0	4	0
NEBRASKA	-	-	-	-
NEVADA	323	295	380	0
NEW HAMPSHIRE	77	1	943	34
NEW JERSEY	7,709	1,428	7,138	0
NEW MEXICO	-	-	-	0
NEW YORK	19,270	1,840	3,946	1,380
NORTH CAROLINA	2,039	881	2,753	158
NORTH DAKOTA	87	-	-	43
OHIO	2,027	1,430	1,403	485
OKLAHOMA	818	143	1,123	0
OREGON	197	35	119	7
PENNSYLVANIA	11,369	5,837	3,075	2,728
PUERTO RICO	375	10	9	46
RHODE ISLAND	483	-	10	-
SOUTH CAROLINA	1,569	2,464	7,381	28
SOUTH DAKOTA	43	0	0	2
TENNESSEE	754	-	-	-
TEXAS	4,858	595	8,831	894
UTAH	1,899	1,659	1,312	30
VERMONT	44	1	65	48
VIRGINIA	7,258	763	3,054	0
WASHINGTON	1,270	-	-	90
WEST VIRGINIA	484	51	223	9
WISCONSIN	-	-	-	-
WYOMING	133	233	293	24
AMERICAN SAMOA	-	-	-	-
GUAM	-	-	-	-
NORTHERN MARIANAS	-	-	-	-
TRUST TERRITORIES	-	-	-	-
VIRGIN ISLANDS	-	-	-	-
BUR. OF INDIAN AFFAIRS	2	152	157	0
U.S. & INSULAR AREAS	125,538	54,923	99,233	17,602
50 STATES, D.C. & P.R.	125,536	54,771	99,076	17,602

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 – 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

HARD OF HEARING & DEAF

STATE	PSYCHOLOGICAL SERVICES	SCHOOL SOCIAL WORK SERVICES	OCCUPATIONAL THERAPY	SPEECH/ LANGUAGE PATHOLOGY	AUDIOLOGICAL SERVICES	RECREATIONAL SERVICES	DIAGNOSTIC SERVICES	PHYSICAL THERAPY
ALABAMA	79	10	25	282	194	423	–	14
ALASKA	37	14	16	120	117	0	39	14
ARIZONA	783	250	56	937	840	205	682	20
ARKANSAS	254	25	2	318	363	144	95	19
CALIFORNIA	–	–	–	–	–	–	–	–
COLORADO	557	557	15	33	923	3	10	15
CONNECTICUT	28	45	5	232	243	25	160	1
DELAWARE	42	4	42	156	143	0	16	4
DISTRICT OF COLUMBIA	16	4	2	31	26	4	15	1
FLORIDA	817	307	26	1,024	2,172	–	268	13
GEORGIA	202	246	18	625	1,266	32	95	6
HAWAII	–	–	17	130	272	0	102	14
IDAHO	8	1	0	108	0	0	0	0
ILLINOIS	245	270	79	1,880	1,945	2	1,221	59
INDIANA	380	207	62	593	836	59	111	24
IOWA	170	160	0	535	1,325	–	490	0
KANSAS	205	24	43	458	765	32	137	17
KENTUCKY	137	200	10	292	442	39	199	8
LOUISIANA	98	375	42	1,172	603	367	508	26
MAINE	404	366	76	324	404	31	451	0
MARYLAND	46	82	24	284	361	56	288	24
MASSACHUSETTS	0	1,861	0	1,063	1,861	1,861	1,861	0
MICHIGAN	905	47	74	2,654	2,587	0	19	0
MINNESOTA	0	0	0	–	1,425	–	645	0
MISSISSIPPI	55	29	10	190	57	16	180	18
MISSOURI	9	0	52	390	635	5	403	42
MONTANA	2	1	1	94	8	0	0	0
NEBRASKA	180	–	–	–	–	–	180	–
NEVADA	32	0	0	29	180	0	8	17
NEW HAMPSHIRE	–	0	17	108	7	1	3	2
NEW JERSEY	78	78	0	1,239	78	1,239	130	0
NEW MEXICO	5	–	81	247	139	0	234	6
NEW YORK	2,178	1,771	0	3,246	5,115	0	613	0
NORTH CAROLINA	307	313	70	1,953	1,726	510	2,493	275
NORTH DAKOTA	67	19	7	–	140	–	–	7
OHIO	635	13	39	1,336	2,946	39	1,127	13
OKLAHOMA	70	150	0	240	596	189	221	0
OREGON	16	5	5	84	132	4	7	0
PENNSYLVANIA	2,167	934	63	2,603	6,462	162	7,585	34
PUERTO RICO	5	322	7	364	–	309	190	3
RHODE ISLAND	4	2	3	49	–	–	–	2
SOUTH CAROLINA	115	270	27	1,350	675	260	299	2
SOUTH DAKOTA	1	0	3	110	193	0	0	5
TENNESSEE	–	–	35	108	465	–	487	80
TEXAS	227	265	117	2,554	1,741	8	321	109
UTAH	298	94	57	606	301	29	458	0
VERMONT	1	0	4	101	97	4	0	2
VIRGINIA	410	410	27	835	1,075	16	410	24
WASHINGTON	30	–	45	836	75	30	434	0
WEST VIRGINIA	82	6	20	335	327	138	49	19
WISCONSIN	–	–	–	–	–	–	–	–
WYOMING	21	14	6	68	46	5	63	11
AMERICAN SAMOA	–	–	–	–	–	–	–	–
GUAM	–	–	–	–	–	–	–	–
NORTHERN MARIANAS	–	–	–	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	3	8	1	13	0	31	14	2
U.S. & INSULAR AREAS	12,411	9,759	1,331	32,419	42,249	6,278	23,233	952
50 STATES, D.C. & P.R.	12,408	9,751	1,330	32,406	42,249	6,247	23,219	950

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

HARD OF HEARING & DEAF

STATE	TRANSPORTATION SERVICES	SCHOOL HEALTH SERVICES	COUNSELING SERVICES	OTHER RELATED SERVICES
ALABAMA	175	84	53	0
ALASKA	93	11	16	7
ARIZONA	645	766	348	94
ARKANSAS	143	296	170	3
CALIFORNIA	-	-	-	1,511
COLORADO	259	557	0	-
CONNECTICUT	216	40	22	1
DELAWARE	9	0	59	69
DISTRICT OF COLUMBIA	22	62	29	0
FLORIDA	961	347	1,297	267
GEORGIA	615	59	61	25
HAWAII	151	0	0	-
IDAHO	0	0	0	0
ILLINOIS	2,217	189	641	1,554
INDIANA	631	616	171	0
IOWA	320	0	5	80
KANSAS	210	90	33	21
KENTUCKY	251	98	48	4
LOUISIANA	808	412	183	320
MAINE	451	103	101	-
MARYLAND	352	375	37	4
MASSACHUSETTS	1,861	1,861	1,861	0
MICHIGAN	440	229	0	0
MINNESOTA	270	0	0	-
MISSISSIPPI	119	42	14	7
MISSOURI	783	33	24	0
MONTANA	0	0	0	0
NEBRASKA	-	-	-	-
NEVADA	54	64	25	0
NEW HAMPSHIRE	25	0	30	42
NEW JERSEY	669	0	0	0
NEW MEXICO	-	-	-	47
NEW YORK	2,143	205	370	154
NORTH CAROLINA	1,022	832	334	81
NORTH DAKOTA	112	-	-	84
OHIO	1,531	972	181	26
OKLAHOMA	304	189	103	0
OREGON	28	25	14	0
PENNSYLVANIA	2,326	1,300	898	46
PUERTO RICO	624	17	94	138
RHODE ISLAND	155	-	1	-
SOUTH CAROLINA	484	377	409	9
SOUTH DAKOTA	124	0	0	0
TENNESSEE	594	-	-	-
TEXAS	2,122	344	223	479
UTAH	60	45	34	3
VERMONT	30	2	3	4
VIRGINIA	1,240	126	154	0
WASHINGTON	719	-	-	105
WEST VIRGINIA	259	158	29	35
WISCONSIN	-	-	-	-
WYOMING	11	26	3	21
AMERICAN SAMOA	-	-	-	-
GUAM	-	-	-	-
NORTHERN MARIANAS	-	-	-	-
TRUST TERRITORIES	-	-	-	-
VIRGIN ISLANDS	-	-	-	-
BUR. OF INDIAN AFFAIRS	4	25	0	0
U.S. & INSULAR AREAS	26,642	10,977	8,078	5,241
50 STATES, D.C. & P.R.	26,638	10,952	8,078	5,241

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

MULTIHANDICAPPED

STATE	PSYCHOLOGICAL SERVICES	SCHOOL SOCIAL WORK SERVICES	OCCUPATIONAL THERAPY	SPEECH/ LANGUAGE PATHOLOGY	AUDIOLOGICAL SERVICES	RECREATIONAL SERVICES	DIAGNOSTIC SERVICES	PHYSICAL THERAPY
ALABAMA	34	62	180	419	37	63	-	329
ALASKA	46	3	59	63	44	2	47	52
ARIZONA	478	185	414	278	314	113	274	383
ARKANSAS	101	62	158	245	67	101	137	124
CALIFORNIA	-	-	-	-	-	-	-	-
COLORADO	1,586	1,586	1,591	127	0	149	509	1,591
CONNECTICUT	122	119	520	510	174	63	48	236
DELAWARE	27	11	3	36	0	36	22	9
DISTRICT OF COLUMBIA	8	43	43	44	0	8	8	44
FLORIDA	8	572	0	76	59	-	0	113
GEORGIA	-	-	-	-	-	-	-	-
HAWAII	-	-	177	96	0	0	210	177
IDAHO	1	0	52	52	0	0	0	0
ILLINOIS	-	-	-	-	-	-	-	-
INDIANA	417	591	724	536	208	192	242	679
IOWA	0	0	92	375	5	-	283	47
KANSAS	183	98	286	322	216	117	158	219
KENTUCKY	2,415	306	303	720	73	276	327	679
LOUISIANA	83	138	545	552	116	70	325	423
MAINE	556	54	556	426	49	56	623	623
MARYLAND	216	184	1,230	592	287	255	570	1,061
MASSACHUSETTS	0	2,923	2,923	2,923	0	2,923	2,923	2,923
MICHIGAN	483	14	1,186	1,086	339	0	96	1,247
MINNESOTA	0	0	0	-	0	-	0	0
MISSISSIPPI	33	21	38	67	13	13	71	51
MISSOURI	232	97	130	265	65	163	506	408
MONTANA	14	0	28	186	0	0	0	49
NEBRASKA	140	-	-	-	-	-	140	-
NEVADA	149	120	22	65	53	53	3	62
NEW HAMPSHIRE	-	0	183	186	1	2	2	127
NEW JERSEY	497	497	3,750	5,913	25	7,497	969	3,748
NEW MEXICO	30	-	253	495	20	0	340	220
NEW YORK	4,500	3,384	0	5,885	0	9,951	1,933	0
NORTH CAROLINA	833	621	678	1,035	612	757	2,507	973
NORTH DAKOTA	0	0	0	-	0	-	-	0
OHIO	1,572	31	1,863	2,936	635	73	1,260	1,343
OKLAHOMA	15	750	550	435	369	359	363	972
OREGON	0	0	0	0	0	0	0	0
PENNSYLVANIA	89	6	146	1,496	8	127	55	321
PUERTO RICO	22	390	203	241	-	192	316	267
RHODE ISLAND	1	3	7	10	-	-	-	11
SOUTH CAROLINA	43	163	119	152	132	214	62	66
SOUTH DAKOTA	12	9	234	363	0	0	0	199
TENNESSEE	-	-	137	690	-	-	549	273
TEXAS	204	244	1,818	2,556	194	129	397	1,638
UTAH	541	375	507	1,031	526	519	468	601
VERMONT	0	0	55	52	7	28	3	53
VIRGINIA	712	712	794	1,444	360	54	712	1,319
WASHINGTON	165	-	583	1,136	60	747	373	539
WEST VIRGINIA	0	0	0	0	0	0	0	0
WISCONSIN	-	-	-	-	-	-	-	-
WYOMING	16	17	66	137	28	4	98	30
AMERICAN SAMOA	-	-	-	-	-	-	-	-
GUAM	-	-	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	13	29	117	84	4	110	68	166
U.S. & INSULAR AREAS	16,597	14,420	23,323	36,338	5,100	25,416	17,997	24,395
50 STATES, D.C. & P.R.	16,584	14,391	23,206	36,254	5,096	25,306	17,929	24,229

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

MULTIHANDICAPPED

STATE	TRANSPORTATION SERVICES	SCHOOL HEALTH SERVICES	COUNSELING SERVICES	OTHER RELATED SERVICES
ALABAMA	693	64	27	0
ALASKA	126	34	39	9
ARIZONA	633	528	148	87
ARKANSAS	222	157	41	25
CALIFORNIA	-	-	-	20
COLORADO	515	1,586	0	-
CONNECTICUT	301	439	79	2
DELAWARE	2	2	15	0
DISTRICT OF COLUMBIA	64	76	21	0
FLORIDA	98	8	0	0
GEORGIA	-	-	-	-
HAWAII	166	0	0	-
IDAHO	0	0	0	0
ILLINOIS	-	-	-	-
INDIANA	791	600	170	0
IOWA	420	120	0	203
KANSAS	286	137	10	43
KENTUCKY	839	238	169	72
LOUISIANA	474	329	14	52
MAINE	623	556	90	-
MARYLAND	2,673	3,409	126	2
MASSACHUSETTS	2,923	2,923	2,923	0
MICHIGAN	1,504	488	0	0
MINNESOTA	0	0	0	-
MISSISSIPPI	102	38	20	10
MISSOURI	1,080	107	287	0
MONTANA	371	2	0	0
NEBRASKA	-	-	-	-
NEVADA	110	239	6	0
NEW HAMPSHIRE	61	2	22	2
NEW JERSEY	4,048	750	376	0
NEW MEXICO	-	-	-	5
NEW YORK	4,160	398	610	299
NORTH CAROLINA	794	911	608	95
NORTH DAKOTA	0	-	-	0
OHIO	2,208	1,188	519	394
OKLAHOMA	898	1,338	129	0
OREGON	0	0	0	0
PENNSYLVANIA	106	80	14	0
PUERTO RICO	355	40	58	124
RHODE ISLAND	32	-	0	-
SOUTH CAROLINA	204	180	75	4
SOUTH DAKOTA	8	0	0	21
TENNESSEE	1,287	-	-	-
TEXAS	2,776	540	349	1,507
UTAH	1,127	307	216	31
VERMONT	58	16	5	22
VIRGINIA	2,140	223	274	0
WASHINGTON	1,449	-	-	165
WEST VIRGINIA	0	0	0	0
WISCONSIN	-	-	-	-
WYOMING	24	4	23	47
AMERICAN SAMOA	-	-	-	-
GUAM	-	-	-	-
NORTHERN MARIANAS	-	-	-	-
TRUST TERRITORIES	-	-	-	-
VIRGIN ISLANDS	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	8	0	3
U.S. & INSULAR AREAS	36,759	18,125	7,463	3,244
50 STATES, D.C. & P.R.	36,759	18,117	7,463	3,241

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

ORTHOPEDICALLY IMPAIRED

STATE	PSYCHOLOGICAL SERVICES	SCHOOL SOCIAL WORK SERVICES	OCCUPATIONAL THERAPY	SPEECH/ LANGUAGE PATHOLOGY	AUDIOLOGICAL SERVICES	RECREATIONAL SERVICES	DIAGNOSTIC SERVICES	PHYSICAL THERAPY
ALABAMA	15	11	139	71	0	9	-	167
ALASKA	18	0	98	88	21	2	38	87
ARIZONA	153	47	237	180	229	39	115	202
ARKANSAS	22	17	84	125	35	26	25	56
CALIFORNIA	-	-	-	-	-	-	-	-
COLORADO	809	809	811	7	0	63	188	811
CONNECTICUT	296	41	225	83	28	0	81	122
DELAWARE	22	0	126	109	11	24	3	144
DISTRICT OF COLUMBIA	46	45	46	1	0	7	46	74
FLORIDA	679	118	1,022	831	202	-	665	917
GEORGIA	160	87	345	254	30	250	59	494
HAWAII	-	-	51	117	0	0	115	129
IDAHO	35	0	0	59	0	0	0	88
ILLINOIS	131	252	1,289	1,520	22	53	1,386	1,938
INDIANA	190	262	351	315	121	62	79	528
IOWA	0	50	625	275	15	-	810	455
KANSAS	123	17	165	144	94	21	68	172
KENTUCKY	98	44	111	147	24	21	97	219
LOUISIANA	70	336	500	373	119	159	317	551
MAINE	368	42	368	246	0	65	400	400
MARYLAND	448	72	439	113	65	5	173	499
MASSACHUSETTS	0	1,461	1,461	0	0	1,461	1,461	1,461
MICHIGAN	-	-	-	-	-	-	-	-
MINNESOTA	0	0	420	-	0	-	760	1,130
MISSISSIPPI	66	17	37	77	14	30	112	101
MISSOURI	339	112	761	501	23	561	412	831
MONTANA	0	0	19	27	0	0	0	29
NEBRASKA	185	-	-	-	-	-	165	-
NEVADA	42	0	1	3	0	31	4	31
NEW HAMPSHIRE	-	1	87	43	0	1	1	70
NEW JERSEY	52	82	390	50	0	779	184	624
NEW MEXICO	7	-	116	109	2	0	156	148
NEW YORK	1,516	1,032	2,246	406	0	3,352	929	3,352
NORTH CAROLINA	109	99	380	237	58	165	254	672
NORTH DAKOTA	14	37	129	-	13	-	-	110
OHIO	-	-	-	-	-	-	-	-
OKLAHOMA	20	0	550	155	0	34	129	372
OREGON	33	9	427	459	62	23	24	458
PENNSYLVANIA	1,771	475	912	1,041	66	604	575	1,397
PUERTO RICO	6	119	51	16	-	62	75	70
RHODE ISLAND	2	3	72	33	-	-	-	104
SOUTH CAROLINA	132	349	309	189	62	51	231	414
SOUTH DAKOTA	0	0	66	56	0	0	0	83
TENNESSEE	-	-	42	217	-	-	356	94
TEXAS	55	92	1,642	1,423	30	73	520	1,787
UTAH	83	178	183	50	97	87	150	199
VERMONT	2	0	45	31	0	20	1	56
VIRGINIA	193	193	299	73	22	9	193	473
WASHINGTON	150	-	224	98	60	120	90	597
WEST VIRGINIA	130	0	122	109	2	24	42	210
WISCONSIN	-	-	2,567	-	-	-	-	2,416
WYOMING	12	7	100	30	11	5	27	39
AMERICAN SAMOA	-	-	-	-	-	-	-	-
GUAM	-	-	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	1	2	8	6	0	31	7	28
U.S. & INSULAR AREAS	8,603	6,488	20,698	10,491	1,538	8,329	11,463	25,407
50 STATES, D.C. & P.R.	8,602	6,486	20,690	10,485	1,538	8,298	11,456	25,379

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

ORTHOPEDICALLY IMPAIRED

STATE	TRANSPORTATION SERVICES	SCHOOL HEALTH SERVICES	COUNSELING SERVICES	OTHER RELATED SERVICES
ALABAMA	227	25	6	0
ALASKA	59	19	15	2
ARIZONA	231	258	254	68
ARKANSAS	83	57	19	4
CALIFORNIA	-	-	-	457
COLORADO	231	809	0	-
CONNECTICUT	121	159	3	1
DELAWARE	173	78	1	36
DISTRICT OF COLUMBIA	74	74	63	0
FLORIDA	732	299	1,027	0
GEORGIA	472	125	102	102
HAWAII	201	0	0	-
IDAHO	0	0	0	0
ILLINOIS	3,259	219	311	1,026
INDIANA	653	262	86	0
IOWA	235	50	5	190
KANSAS	192	69	29	15
KENTUCKY	319	90	31	19
LOUISIANA	412	185	11	113
MAINE	400	368	330	-
MARYLAND	302	394	14	3
MASSACHUSETTS	1,461	1,461	1,461	0
MICHIGAN	-	-	-	-
MINNESOTA	260	0	0	-
MISSISSIPPI	160	71	15	6
MISSOURI	1,224	344	65	422
MONTANA	151	0	0	0
NEBRASKA	-	-	-	-
NEVADA	73	40	39	0
NEW HAMPSHIRE	25	5	20	217
NEW JERSEY	779	0	0	0
NEW MEXICO	-	-	-	0
NEW YORK	1,404	134	166	101
NORTH CAROLINA	621	236	475	24
NORTH DAKOTA	60	-	-	13
OHIO	-	-	-	-
OKLAHOMA	349	94	78	0
OREGON	606	213	38	19
PENNSYLVANIA	1,570	896	176	25
PUERTO RICO	108	0	24	46
RHODE ISLAND	163	-	0	-
SOUTH CAROLINA	431	519	764	55
SOUTH DAKOTA	328	0	0	4
TENNESSEE	518	-	-	-
TEXAS	2,140	161	301	792
UTAH	111	105	48	3
VERMONT	23	3	4	4
VIRGINIA	583	61	75	0
WASHINGTON	344	-	-	150
WEST VIRGINIA	210	79	5	53
WISCONSIN	-	-	-	-
WYOMING	21	17	6	25
AMERICAN SAMOA	-	-	-	-
GUAM	-	-	-	-
NORTHERN MARIANAS	-	-	-	-
TRUST TERRITORIES	-	-	-	-
VIRGIN ISLANDS	-	-	-	-
BUR. OF INDIAN AFFAIRS	20	31	0	0
U.S. & INSULAR AREAS	22,119	8,010	6,067	3,995
50 STATES, D.C. & P.R.	22,099	7,979	6,067	3,995

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

OTHER HEALTH IMPAIRED

STATE	PSYCHOLOGICAL SERVICES	SCHOOL SOCIAL WORK SERVICES	OCCUPATIONAL THERAPY	SPEECH/ LANGUAGE PATHOLOGY	AUDIOLOGICAL SERVICES	RECREATIONAL SERVICES	DIAGNOSTIC SERVICES	PHYSICAL THERAPY
ALABAMA	11	4	27	33	1	1	-	34
ALASKA	34	0	27	25	11	0	45	19
ARIZONA	95	73	43	28	56	9	92	40
ARKANSAS	17	111	57	58	26	21	70	28
CALIFORNIA	-	-	-	-	-	-	-	-
COLORADO	-	-	-	-	-	-	-	-
CONNECTICUT	21	34	115	78	504	0	109	92
DELAWARE	16	9	0	10	1	0	15	50
DISTRICT OF COLUMBIA	32	82	0	3	0	6	83	1
FLORIDA	503	15	0	79	0	-	390	0
GEORGIA	41	18	24	17	7	14	24	20
HAWAII	-	-	-	-	0	0	-	-
IDAHO	11	4	0	20	0	0	0	3
ILLINOIS	121	293	111	397	5	9	607	82
INDIANA	23	92	17	33	11	25	33	13
IOWA	0	0	0	0	0	-	0	0
KANSAS	45	90	78	98	120	10	86	37
KENTUCKY	101	70	49	50	64	11	76	79
LOUISIANA	67	133	222	698	113	45	453	111
MAINE	438	42	64	50	0	0	456	118
MARYLAND	45	60	181	124	60	4	233	104
MASSACHUSETTS	0	1,860	0	0	0	1,857	1,860	0
MICHIGAN	1,502	146	4,833	2,166	286	0	327	3,965
MINNESOTA	0	0	410	-	550	-	805	260
MISSISSIPPI	-	-	-	-	-	-	-	-
MISSOURI	42	0	37	19	10	0	177	74
MONTANA	9	0	1	19	0	0	0	5
NEBRASKA	0	-	-	-	-	-	0	-
NEVADA	9	0	36	12	0	0	0	0
NEW HAMPSHIRE	-	0	101	118	2	2	0	23
NEW JERSEY	52	52	0	8	0	824	104	0
NEW MEXICO	4	-	50	26	0	0	500	65
NEW YORK	9,257	6,266	0	3,132	0	20,469	1,161	20,469
NORTH CAROLINA	482	139	103	265	81	139	499	166
NORTH DAKOTA	13	17	46	-	37	-	-	29
OHIO	1,058	0	1,565	506	391	72	955	1,796
OKLAHOMA	20	25	0	89	0	28	75	160
OREGON	23	5	241	278	36	17	13	306
PENNSYLVANIA	0	0	0	0	0	0	0	0
PUERTO RICO	10	39	11	14	-	26	43	26
RHODE ISLAND	4	1	9	10	-	-	-	9
SOUTH CAROLINA	13	71	30	55	35	4	51	16
SOUTH DAKOTA	1	4	2	6	0	0	0	2
TENNESSEE	-	-	6	40	-	-	536	16
TEXAS	178	136	1,191	2,322	33	50	872	687
UTAH	48	34	52	19	12	14	51	35
VERMONT	3	0	20	38	2	21	9	17
VIRGINIA	91	91	5	32	9	3	91	34
WASHINGTON	463	-	492	732	433	329	314	314
WEST VIRGINIA	4	2	14	49	13	1	10	38
WISCONSIN	-	-	-	-	-	-	-	-
WYOMING	29	27	69	42	10	4	50	22
AMERICAN SAMOA	-	-	-	-	-	-	-	-
GUAM	-	-	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	7	7	4	11	1	0	18	15
U.S. & INSULAR AREAS	14,943	10,052	9,543	11,809	2,920	24,015	11,293	29,380
50 STATES, D.C. & P.R.	14,936	10,045	9,539	11,798	2,919	24,015	11,275	29,365

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

OTHER HEALTH IMPAIRED

STATE	TRANSPORTATION SERVICES	SCHOOL HEALTH SERVICES	COUNSELING SERVICES	OTHER RELATED SERVICES
ALABAMA	51	88	7	0
ALASKA	10	11	9	0
ARIZONA	51	149	59	445
ARKANSAS	50	19	32	3
CALIFORNIA	-	-	-	2,430
COLORADO	-	-	-	-
CONNECTICUT	114	14	2	0
DELAWARE	7	17	3	28
DISTRICT OF COLUMBIA	91	91	54	0
FLORIDA	430	0	0	0
GEORGIA	27	28	35	42
HAWAII	280	0	0	-
IDAHO	0	0	0	0
ILLINOIS	624	150	142	301
INDIANA	50	12	19	0
IOWA	0	0	0	0
KANSAS	32	55	19	16
KENTUCKY	120	112	85	64
LOUISIANA	331	177	87	24
MAINE	456	438	41	-
MARYLAND	199	39	7	2
MASSACHUSETTS	1,860	1,860	1,860	0
MICHIGAN	4,377	1,992	0	0
MINNESOTA	100	310	0	-
MISSISSIPPI	-	-	-	-
MISSOURI	84	122	14	107
MONTANA	70	5	0	0
NEBRASKA	-	-	-	-
NEVADA	0	31	0	0
NEW HAMPSHIRE	42	26	28	39
NEW JERSEY	445	248	0	0
NEW MEXICO	-	-	-	0
NEW YORK	8,573	5,117	1,470	614
NORTH CAROLINA	553	381	1,079	98
NORTH DAKOTA	14	-	-	7
OHIO	1,724	1,376	245	87
OKLAHOMA	203	78	44	0
OREGON	410	86	24	0
PENNSYLVANIA	0	0	0	0
PUERTO RICO	57	0	3	11
RHODE ISLAND	33	-	1	-
SOUTH CAROLINA	201	431	607	0
SOUTH DAKOTA	117	0	0	0
TENNESSEE	198	-	-	-
TEXAS	1,926	233	567	388
UTAH	44	211	44	14
VERMONT	16	8	10	3
VIRGINIA	279	27	32	0
WASHINGTON	1,075	-	-	687
WEST VIRGINIA	54	4	1	25
WISCONSIN	-	-	-	-
WYOMING	16	38	7	28
AMERICAN SAMOA	-	-	-	-
GUAM	-	-	-	-
NORTHERN MARIANAS	-	-	-	-
TRUST TERRITORIES	-	-	-	-
VIRGIN ISLANDS	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	28	4	0
U.S. & INSULAR AREAS	25,478	14,012	6,641	5,463
50 STATES, D.C. & P.R.	25,478	13,984	6,637	5,463

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

VISUALLY HANDICAPPED

STATE	PSYCHOLOGICAL SERVICES	SCHOOL SOCIAL WORK SERVICES	OCCUPATIONAL THERAPY	SPEECH/ LANGUAGE PATHOLOGY	AUDIOLOGICAL SERVICES	RECREATIONAL SERVICES	DIAGNOSTIC SERVICES	PHYSICAL THERAPY
ALABAMA	44	4	32	32	14	153	-	11
ALASKA	7	1	5	12	4	0	7	11
ARIZONA	108	43	43	145	100	100	172	35
ARKANSAS	108	109	32	111	26	100	134	0
CALIFORNIA	-	-	-	-	-	-	-	-
COLORADO	187	187	14	0	0	3	9	14
CONNECTICUT	15	9	105	33	22	51	2	0
DELAWARE	13	0	24	60	6	5	20	16
DISTRICT OF COLUMBIA	30	2	10	0	0	0	0	0
FLORIDA	195	7	53	219	118	-	210	47
GEORGIA	65	82	26	55	13	23	129	17
HAWAII	-	-	17	7	0	0	23	12
IDAHO	7	2	0	14	0	0	0	1
ILLINOIS	145	122	84	244	10	4	422	54
INDIANA	353	315	55	76	229	255	217	98
IOWA	0	0	85	30	5	-	190	0
KANSAS	144	10	88	80	109	65	107	40
KENTUCKY	99	329	7	29	45	22	92	11
LOUISIANA	117	175	31	97	104	84	204	43
MAINE	162	40	55	74	0	15	209	4
MARYLAND	44	36	104	43	59	170	153	92
MASSACHUSETTS	0	797	0	0	0	797	797	0
MICHIGAN	286	0	21	0	0	0	0	0
MINNESOTA	0	0	0	-	0	-	1,140	0
MISSISSIPPI	20	9	0	12	6	6	35	10
MISSOURI	24	0	14	51	0	0	88	14
MONTANA	0	0	2	12	0	0	0	0
NEBRASKA	70	-	-	-	-	-	0	-
NEVADA	16	0	0	3	5	10	10	2
NEW HAMPSHIRE	-	0	13	11	1	0	1	3
NEW JERSEY	1	1	0	10	0	217	11	0
NEW MEXICO	1	-	48	47	0	0	123	21
NEW YORK	849	642	0	203	0	1,877	184	0
NORTH CAROLINA	673	53	21	173	111	165	673	29
NORTH DAKOTA	48	2	17	-	38	-	-	13
OHIO	258	0	30	363	196	45	242	91
OKLAHOMA	10	25	0	79	0	112	66	0
OREGON	7	3	3	21	19	0	5	0
PENNSYLVANIA	902	524	397	277	29	162	6,523	44
PUERTO RICO	1	95	1	0	-	62	52	0
RHODE ISLAND	1	1	7	7	-	-	-	4
SOUTH CAROLINA	65	65	16	36	25	76	56	0
SOUTH DAKOTA	1	0	4	12	0	0	0	1
TENNESSEE	-	-	3	22	-	-	201	9
TEXAS	40	39	237	356	11	9	109	135
UTAH	90	21	6	15	43	28	199	18
VERMONT	0	0	5	2	1	3	0	1
VIRGINIA	174	174	12	65	19	8	174	10
WASHINGTON	90	-	30	1,553	30	15	105	45
WEST VIRGINIA	47	1	39	23	81	89	127	16
WISCONSIN	-	-	-	-	-	-	-	-
WYOMING	3	0	6	7	0	3	3	1
AMERICAN SAMOA	-	-	-	-	-	-	-	-
GUAM	-	-	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	1	3	1	0	0	13	6	3
U.S. & INSULAR AREAS	5,640	3,948	1,883	4,721	1,567	4,769	13,230	984
50 STATES, D.C. & P.R.	5,639	3,945	1,882	4,721	1,567	4,756	13,224	981

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES
DURING THE 1984-85 SCHOOL YEAR

VISUALLY HANDICAPPED

STATE	TRANSPORTATION SERVICES	SCHOOL HEALTH SERVICES	COUNSELING SERVICES	OTHER RELATED SERVICES
ALABAMA	70	143	38	0
ALASKA	17	1	6	6
ARIZONA	191	232	159	47
ARKANSAS	73	127	16	6
CALIFORNIA	-	-	-	208
COLORADO	58	187	0	-
CONNECTICUT	9	1	3	0
DELAWARE	37	15	15	0
DISTRICT OF COLUMBIA	32	32	4	30
FLORIDA	431	15	378	0
GEORGIA	144	44	23	45
HAWAII	33	0	0	-
IDAHO	0	0	0	0
ILLINOIS	702	105	122	926
INDIANA	436	361	154	0
IOWA	35	0	0	75
KANSAS	169	88	14	7
KENTUCKY	118	56	32	16
LOUISIANA	231	136	28	154
MAINE	209	162	40	-
MARYLAND	361	290	19	0
MASSACHUSETTS	797	797	797	0
MICHIGAN	0	0	0	0
MINNESOTA	250	0	0	-
MISSISSIPPI	33	15	9	8
MISSOURI	251	38	41	173
MONTANA	31	0	0	0
NEBRASKA	-	-	-	-
NEVADA	18	25	4	0
NEW HAMPSHIRE	2	0	0	82
NEW JERSEY	117	0	0	0
NEW MEXICO	-	-	-	3
NEW YORK	786	75	138	56
NORTH CAROLINA	251	658	2,643	440
NORTH DAKOTA	11	-	-	44
OHIO	575	317	105	605
OKLAHOMA	98	112	39	0
OREGON	11	6	7	0
PENNSYLVANIA	861	536	328	37
PUERTO RICO	128	41	21	39
RHODE ISLAND	37	-	0	-
SOUTH CAROLINA	229	136	143	101
SOUTH DAKOTA	404	0	0	3
TENNESSEE	135	-	-	-
TEXAS	554	54	197	1,222
UTAH	30	25	20	2
VERMONT	5	0	5	1
VIRGINIA	526	55	66	0
WASHINGTON	75	-	-	75
WEST VIRGINIA	117	109	30	83
WISCONSIN	-	-	-	-
WYOMING	1	2	0	13
AMERICAN SAMOA	-	-	-	-
GUAM	-	-	-	-
NORTHERN MARIANAS	-	-	-	-
TRUST TERRITORIES	-	-	-	-
VIRGIN ISLANDS	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	0	0	0
U.S. & INSULAR AREAS	9,681	4,996	5,644	4,507
50 STATES, D.C. & P.R.	9,681	4,996	5,644	4,507

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

DEAF-BLIND

STATE	PSYCHOLOGICAL SERVICES	SCHOOL SOCIAL WORK SERVICES	OCCUPATIONAL THERAPY	SPEECH/ LANGUAGE PATHOLOGY	AUDIOLOGICAL SERVICES	RECREATIONAL SERVICES	DIAGNOSTIC SERVICES	PHYSICAL THERAPY
ALABAMA	22	8	6	7	4	41	-	10
ALASKA	0	0	0	4	12	0	2	7
ARIZONA	10	2	3	34	9	5	4	13
ARKANSAS	7	138	0	20	11	7	9	3
CALIFORNIA	-	-	-	-	-	-	-	-
COLORADO	80	80	73	0	80	7	65	73
CONNECTICUT	1	1	1	0	1	1	1	1
DELAWARE	11	0	20	24	5	0	2	10
DISTRICT OF COLUMBIA	9	32	32	24	10	9	23	2
FLORIDA	23	0	0	24	0	-	8	16
GEORGIA	0	11	2	6	5	1	0	2
HAWAII	-	-	7	3	0	0	4	5
IDAHO	0	0	0	0	0	0	0	0
ILLINOIS	3	16	8	23	23	0	31	15
INDIANA	6	1	0	0	0	0	0	0
IOWA	0	0	13	30	5	-	67	13
KANSAS	4	2	8	7	8	3	3	8
KENTUCKY	3	5	1	70	5	1	53	29
LOUISIANA	87	85	19	61	4	9	14	6
MAINE	1	1	1	1	1	0	1	1
MARYLAND	27	4	49	5	20	51	27	39
MASSACHUSETTS	0	132	0	0	0	132	132	0
MICHIGAN	0	0	0	0	0	0	0	0
MINNESOTA	0	0	0	-	45	-	45	0
MISSISSIPPI	0	0	2	1	0	0	0	0
MISSOURI	0	64	167	92	102	0	28	69
MONTANA	11	0	1	3	0	0	0	2
NEBRASKA	0	-	-	-	-	-	0	-
NEVADA	0	0	0	4	15	0	0	0
NEW HAMPSHIRE	-	0	4	3	0	1	0	1
NEW JERSEY	1	1	0	15	0	15	2	0
NEW MEXICO	10	-	122	68	6	0	9	74
NEW YORK	62	81	0	122	136	45	23	0
NORTH CAROLINA	11	10	14	22	28	18	10	12
NORTH DAKOTA	10	11	9	-	4	-	-	2
OHIO	-	-	-	-	-	-	-	-
OKLAHOMA	15	43	0	14	30	7	13	22
OREGON	0	0	0	0	0	0	0	0
PENNSYLVANIA	29	3	12	3	1	10	9	16
PUERTO RICO	0	81	77	61	-	78	57	55
RHODE ISLAND	1	0	3	4	-	-	-	2
SOUTH CAROLINA	2	0	1	2	0	0	0	0
SOUTH DAKOTA	0	0	7	5	0	0	0	3
TENNESSEE	-	-	4	3	-	-	6	1
TEXAS	12	12	50	53	22	3	4	47
UTAH	9	2	29	24	19	78	23	35
VERMONT	0	0	0	1	1	2	0	0
VIRGINIA	8	8	0	15	0	0	8	0
WASHINGTON	15	-	0	0	0	0	0	15
WEST VIRGINIA	8	0	17	1	21	1	0	18
WISCONSIN	-	-	-	-	-	-	-	-
WYOMING	24	29	1	4	3	1	2	3
AMERICAN SAMOA	-	-	-	-	-	-	-	-
GUAM	-	-	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	0	0	0	0	0	0	0
U.S. & INSULAR AREAS	522	863	763	863	636	526	685	638
50 STATES, D.C. & P.R.	522	863	763	863	636	526	685	638

DATA AS OF OCTOBER 1, 1986.

Table EB1

NUMBER OF HANDICAPPED CHILDREN 3 - 21 YEARS OLD RECEIVING RELATED SERVICES DURING THE 1984-85 SCHOOL YEAR

DEAF-BLIND

STATE	TRANSPORTATION SERVICES	SCHOOL HEALTH SERVICES	COUNSELING SERVICES	OTHER RELATED SERVICES
ALABAMA	8	40	6	0
ALASKA	12	13	0	0
ARIZONA	6	5	1	55
ARKANSAS	5	8	2	0
CALIFORNIA	-	-	-	7,287
COLORADO	15	80	0	-
CONNECTICUT	2	0	0	0
DELAWARE	5	0	1	4
DISTRICT OF COLUMBIA	24	24	0	21
FLORIDA	23	16	16	0
GEORGIA	7	0	0	1
HAWAII	16	0	0	-
IDAHO	0	0	0	0
ILLINOIS	41	5	2	46
INDIANA	1	0	0	0
IOWA	150	40	0	82
KANSAS	10	6	0	1
KENTUCKY	9	0	4	0
LOUISIANA	27	25	2	5
MAINE	1	1	1	-
MARYLAND	57	90	2	0
MASSACHUSETTS	132	132	132	0
MICHIGAN	0	0	0	0
MINNESOTA	45	0	0	-
MISSISSIPPI	6	0	0	0
MISSOURI	196	98	0	65
MONTANA	21	0	0	0
NEBRASKA	-	-	-	-
NEVADA	0	0	0	0
NEW HAMPSHIRE	2	1	0	928
NEW JERSEY	15	0	0	0
NEW MEXICO	-	-	-	0
NEW YORK	57	740	12	4
NORTH CAROLINA	22	18	0	0
NORTH DAKOTA	1	-	-	12
OHIO	-	-	-	-
OKLAHOMA	36	36	21	0
OREGON	0	0	0	0
PENNSYLVANIA	30	8	5	2
PUERTO RICO	44	1	9	38
RHODE ISLAND	6	-	0	-
SOUTH CAROLINA	0	53	54	0
SOUTH DAKOTA	3,021	0	0	1
TENNESSEE	9	-	-	-
TEXAS	79	19	7	30
UTAH	19	20	1	0
VERMONT	1	0	0	1
VIRGINIA	26	3	3	0
WASHINGTON	8	-	-	0
WEST VIRGINIA	16	18	0	0
WISCONSIN	-	-	-	-
WYOMING	2	30	19	2
AMERICAN SAMOA	-	-	-	-
GUAM	-	-	-	-
NORTHERN MARIANAS	-	-	-	-
TRUST TERRITORIES	-	-	-	-
VIRGIN ISLANDS	-	-	-	-
BUR. OF INDIAN AFFAIRS	57	145	92	0
U.S. & INSULAR AREAS	4,262	1,675	392	8,585
50 STATES, D.C. & P.R.	4,205	1,530	300	8,585

DATA AS OF OCTOBER 1, 1986.

Table EC1

NUMBER OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

STATE	ALL CONDITIONS NUMBER								
	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	61,948	-	24,933	96	-	-	-	-	-
ALASKA	4,673	3,645	2,191	355	31	4	18	23	10
ARIZONA	198	44,222	4,777	178	865	367	282	107	480
ARKANSAS	12,871	29,655	5,859	323	1,511	595	68	124	186
CALIFORNIA	109,215	139,470	112,603	-	3,223	-	-	526	-
COLORADO	11,433	22,814	8,552	1,889	14	440	310	0	664
CONNECTICUT	32,565	9,891	14,367	2,722	3,077	373	1,842	934	-
DELAWARE	3,283	5,663	2,807	1,672	46	96	41	233	206
DISTRICT OF COLUMBIA	1,641	2,951	1,200	847	543	28	184	0	0
FLORIDA	55,678	48,543	47,018	11,338	971	1,137	697	0	1,981
GEORGIA	746	79,634	19,463	1,990	11	1,124	69	28	285
HAWAII	4,923	4,535	3,103	199	28	56	42	45	26
IDAHO	6,525	6,689	3,336	13	127	276	42	25	0
ILLINOIS	70,831	79,264	68,320	15,222	4,705	849	1,439	656	967
INDIANA	41,350	28,819	26,911	4,659	0	1,223	38	0	42
IOWA	11,787	23,200	18,471	-	0	579	-	-	3,195
KANSAS	13,583	16,016	8,254	200	1,049	911	94	665	482
KENTUCKY	22,580	36,117	12,101	2,874	124	531	46	70	721
LOUISIANA	26,779	14,553	31,348	3,944	2,018	2,269	-	140	328
MAINE	3,576	13,616	4,766	1,053	3,009	391	431	68	555
MARYLAND	5,785	49,094	22,062	9,792	1,220	1,286	262	301	660
MASSACHUSETTS	10,969	88,373	24,520	2,596	3,729	875	736	112	941
MICHIGAN	95,008	31,423	29,507	3,074	1,145	1,479	0	143	0
MINNESOTA	10,096	50,874	11,385	9,404	-	387	-	19	1,677
MISSISSIPPI	12,059	26,337	11,786	916	702	779	146	53	182
MISSOURI	3,343	77,639	20,445	2,481	2,695	786	0	247	612
MONTANA	10,299	2,862	2,042	201	0	171	55	0	210
NEBRASKA	5,011	22,118	2,345	12	6	216	266	126	173
NEVADA	3,816	7,290	1,820	704	10	2	0	4	105
NEW HAMPSHIRE	9,773	2,683	1,918	21	724	23	290	7	123
NEW JERSEY	62,099	31,668	46,833	4,786	18,466	1,777	180	386	761
NEW MEXICO	15,503	6,676	5,395	101	28	392	2	61	20
NEW YORK	28,939	94,529	118,992	21,595	12,726	1,610	5,391	1,784	1,405
NORTH CAROLINA	28,869	68,607	15,937	2,976	269	1,872	453	335	774
NORTH DAKOTA	9,063	-	2,068	309	-	6	41	10	239
OHIO	71,251	43,959	58,399	4,612	11,437	9,082	0	523	1,906
OKLAHOMA	19,811	32,157	9,854	441	281	1,350	181	7	1,502
OREGON	29,269	9,882	4,146	1,795	426	438	422	-	863
PENNSYLVANIA	70,703	33,537	69,807	7,843	9,548	322	570	1,554	888
PUERTO RICO	1,717	15,840	9,215	1,178	520	127	83	0	3,767
RHODE ISLAND	9,746	2,064	4,635	166	533	66	154	43	136
SOUTH CAROLINA	22,442	33,209	14,266	1,518	521	1,001	53	172	226
SOUTH DAKOTA	865	10,384	735	10	174	166	315	0	55
TENNESSEE	31,752	45,474	15,150	2,942	668	1,193	50	85	1,721
TEXAS	6,483	241,030	29,112	13,170	1,807	970	364	514	2,213
UTAH	15,187	18,166	4,417	2,742	96	66	1	152	510
VERMONT	5,177	2,880	1,642	80	259	8	117	0	227
VIRGINIA	1,532	64,865	29,327	3,730	933	1,595	930	318	129
WASHINGTON	17,551	34,759	14,351	-	929	769	0	199	252
WEST VIRGINIA	20,331	14,025	7,422	928	23	419	11	48	29
WISCONSIN	21,835	30,299	19,730	829	32	716	1	70	185
WYOMING	5,008	3,294	1,398	198	12	111	83	34	18
AMERICAN SAMOA	8	116	9	65	0	0	0	0	0
GUAM	400	397	922	166	0	0	1	0	8
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	3,272	1,564	326	0	0	3	171	0	0
U.S. & INSULAR AREAS	1,161,157	1,807,451	1,032,298	150,955	90,471	41,312	16,972	10,951	32,565
50 STATES, D.C. & P.R.	1,157,477	1,805,374	1,031,841	150,724	90,471	41,309	16,800	10,951	32,557

DATA AS OF OCTOBER 1, 1986.

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Table EC1

PERCENT OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

STATE	ALL CONDITIONS PERCENT								
	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	71.22	-	28.67	0.11	-	-	-	-	-
ALASKA	42.68	33.29	20.01	3.24	0.28	0.04	0.16	0.21	0.09
ARIZONA	0.38	85.91	9.28	0.35	1.68	0.71	0.55	0.21	0.93
ARKANSAS	25.14	57.93	11.45	0.63	2.95	1.16	0.13	0.24	0.36
CALIFORNIA	29.92	38.21	30.85	-	0.88	-	-	0.14	-
COLORADO	24.79	49.47	18.54	4.10	0.03	0.95	0.67	0.00	1.44
CONNECTICUT	49.51	15.04	21.84	4.14	4.68	0.57	2.80	1.42	-
DELAWARE	23.37	40.31	19.98	11.90	0.33	0.68	0.29	1.66	1.47
DISTRICT OF COLUMBIA	22.19	39.91	16.23	11.46	7.34	0.38	2.49	0.00	0.00
FLORIDA	33.26	29.02	28.11	6.78	0.58	0.68	0.42	0.00	1.14
GEORGIA	0.72	77.05	18.83	1.93	0.01	1.09	0.07	0.03	0.28
HAWAII	37.99	35.00	23.95	1.54	0.22	0.43	0.32	0.35	0.20
IDAHO	38.31	39.27	19.59	0.08	0.75	1.62	0.25	0.15	0.00
ILLINOIS	29.24	32.72	28.20	6.28	1.94	0.35	0.59	0.27	0.40
INDIANA	40.13	27.97	26.12	4.52	0.00	1.19	0.04	0.00	0.04
IOWA	20.57	40.62	32.23	-	0.00	1.01	-	-	5.57
KANSAS	32.93	38.82	20.01	0.48	2.54	2.21	0.23	1.61	1.17
KENTUCKY	30.04	48.05	16.10	3.82	0.16	0.71	0.06	0.09	0.96
LOUISIANA	32.91	17.88	38.52	4.85	2.48	2.79	-	0.17	0.40
MAINE	13.02	49.58	17.35	3.83	10.96	1.42	1.57	0.25	2.02
MARYLAND	6.39	54.27	24.39	10.82	1.35	1.42	0.29	0.33	0.73
MASSACHUSETTS	8.26	66.52	18.46	1.95	2.81	0.66	0.55	0.08	0.71
MICHIGAN	58.73	19.42	18.24	1.90	0.71	0.91	0.00	0.09	0.00
MINNESOTA	12.04	60.68	13.58	11.22	-	0.46	-	0.02	2.00
MISSISSIPPI	22.77	49.73	22.25	1.73	1.33	1.47	0.28	0.10	0.34
MISSOURI	3.09	71.72	18.89	2.29	2.49	0.73	0.00	0.23	0.57
MONTANA	65.02	18.07	12.89	1.27	0.00	1.08	0.35	0.00	1.33
NEBRASKA	16.55	73.06	7.75	0.04	0.02	0.71	0.88	0.42	0.57
NEVADA	27.75	53.01	13.24	5.12	0.07	0.01	0.00	0.03	0.76
NEW HAMPSHIRE	62.80	17.24	12.32	0.13	4.65	0.15	1.86	0.04	0.79
NEW JERSEY	37.19	18.97	28.05	2.87	11.06	1.06	0.11	0.23	0.46
NEW MEXICO	55.02	23.69	19.15	0.36	0.10	1.39	0.01	0.22	0.07
NEW YORK	10.08	32.94	41.46	7.53	4.43	0.56	1.88	0.62	0.49
NORTH CAROLINA	24.04	57.13	13.27	2.48	0.22	1.56	0.38	0.28	0.64
NORTH DAKOTA	77.22	-	17.62	2.63	-	0.05	0.35	0.09	2.04
OHIO	35.42	21.85	29.03	2.29	5.69	4.51	0.00	0.26	0.95
OKLAHOMA	30.21	49.03	15.03	0.67	0.43	2.06	0.28	0.01	2.29
OREGON	61.96	20.92	8.78	3.80	0.90	0.93	0.89	-	1.83
PENNSYLVANIA	36.30	17.22	35.84	4.03	4.90	0.17	0.29	0.80	0.46
PUERTO RICO	5.29	48.82	28.40	3.63	1.60	0.39	0.26	0.00	11.61
RHODE ISLAND	55.55	11.77	26.42	0.95	3.04	0.38	0.88	0.25	0.78
SOUTH CAROLINA	30.57	45.24	19.43	2.07	0.71	1.36	0.07	0.23	0.31
SOUTH DAKOTA	6.81	81.74	5.79	0.08	1.37	1.31	2.48	0.00	0.43
TENNESSEE	32.06	45.92	15.30	2.97	0.67	1.20	0.05	0.09	1.74
TEXAS	2.20	81.74	9.87	4.47	0.34	0.33	0.12	0.17	0.75
UTAH	36.74	43.95	10.69	6.63	0.23	0.16	0.00	0.37	1.23
VERMONT	49.83	27.72	15.80	0.77	2.49	0.08	1.13	0.00	2.18
VIRGINIA	1.48	62.76	28.37	3.61	0.90	1.54	0.90	0.31	0.12
WASHINGTON	25.51	50.51	20.86	-	1.35	1.12	0.00	0.29	0.37
WEST VIRGINIA	47.02	32.44	17.17	2.15	0.05	0.97	0.03	0.11	0.07
WISCONSIN	29.63	41.11	26.77	1.12	0.04	0.97	0.00	0.09	0.25
WYOMING	49.31	32.43	13.77	1.95	0.12	1.09	0.82	0.33	0.18
AMERICAN SAMOA	4.04	58.59	4.55	32.83	0.00	0.00	0.00	0.00	0.00
GUAM	21.12	20.96	48.68	8.76	0.00	0.00	0.05	0.00	0.42
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	61.32	29.31	6.11	0.00	0.00	0.06	3.20	0.00	0.00
U.S. & INSULAR AREAS	26.73	41.61	23.76	3.47	2.08	0.95	0.39	0.25	0.75
50 STATES, D.C. & P.R.	26.69	41.63	23.77	3.48	2.09	0.95	0.39	0.25	0.75

DATA AS OF OCTOBER 1, 1986.

Table EC1

NUMBER OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

LEARNING DISABLED

NUMBER

STATE	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	25,251	-	621	1	-	-	-	-	-
ALASKA	2,588	2,590	1,152	41	9	0	1	19	4
ARIZONA	15	23,502	2,469	0	23	0	1	9	0
ARKANSAS	4,483	18,376	969	2	11	0	12	101	34
CALIFORNIA	7,287	135,849	59,985	-	721	-	-	304	-
COLORADO	3,023	16,114	1,415	116	0	1	10	0	7
CONNECTICUT	16,569	6,655	4,593	501	637	1	49	5	-
DELAWARE	1,471	3,392	1,517	494	8	0	4	3	18
DISTRICT OF COLUMBIA	43	2,414	379	140	127	1	2	0	0
FLORIDA	8,948	35,791	16,093	434	456	0	40	0	0
GEORGIA	219	28,946	2,643	0	6	0	4	0	6
HAWAII	2,482	3,942	1,027	0	1	5	0	32	0
IDAHO	3,608	4,668	35	1	21	0	0	3	0
ILLINOIS	6,690	63,841	24,597	1,011	155	8	13	62	40
INDIANA	558	24,439	7,044	63	0	3	0	0	2
IOWA	247	18,053	3,737	-	0	0	-	-	7
KANSAS	2,247	12,740	1,399	0	82	0	0	0	13
KENTUCKY	2,351	16,889	2,508	188	1	21	1	29	41
LOUISIANA	7,442	9,095	19,946	258	268	3	-	50	0
MAINE	682	6,832	757	110	1,347	0	26	0	62
MARYLAND	3,133	27,096	14,562	1,600	114	5	1	204	60
MASSACHUSETTS	3,872	31,197	8,656	917	1,315	309	260	40	332
MICHIGAN	39,400	10,969	11,439	92	55	21	0	91	0
MINNESOTA	4,673	28,330	2,184	1,344	-	0	-	17	108
MISSISSIPPI	11,937	4,901	3,626	57	354	0	19	25	11
MISSOURI	682	35,396	3,827	0	506	18	0	144	44
MONTANA	4,591	2,098	717	8	0	0	3	0	0
NEBRASKA	2,045	9,029	962	0	3	0	0	55	0
NEVADA	1,026	6,170	616	5	4	0	0	3	0
NEW HAMPSHIRE	6,140	1,885	843	0	158	1	44	2	9
NEW JERSEY	10,623	27,348	27,263	123	2,961	21	14	78	101
NEW MEXICO	7,658	2,537	869	3	4	0	2	21	0
NEW YORK	772	74,696	50,178	4,203	505	0	117	501	94
NORTH CAROLINA	12,710	35,929	3,595	12	7	9	1	94	53
NORTH DAKOTA	4,889	-	227	5	-	0	0	3	10
OHIO	21,974	37,200	11,805	165	1,697	0	0	194	21
OKLAHOMA	0	26,312	1,504	10	10	30	0	5	73
OREGON	17,659	5,887	685	269	22	25	19	-	13
PENNSYLVANIA	6,996	24,861	29,865	677	1,852	0	14	118	91
PUERTO RICO	279	3,437	338	5	19	4	2	0	34
RHODE ISLAND	6,445	1,759	3,058	33	63	0	18	11	9
SOUTH CAROLINA	1,795	18,279	4,223	102	0	0	4	36	8
SOUTH DAKOTA	332	3,670	45	0	10	1	6	0	1
TENNESSEE	4,436	33,377	5,155	157	22	0	3	54	36
TEXAS	3,405	127,947	15,297	6,703	446	60	123	378	69
UTAH	5,597	7,825	922	93	6	0	0	30	20
VERMONT	1,742	1,964	40	5	57	0	8	0	14
VIRGINIA	642	30,378	12,897	417	151	12	207	54	3
WASHINGTON	4,959	27,901	3,888	-	10	0	0	99	97
WEST VIRGINIA	5,997	9,681	1,467	1	0	0	0	12	0
WISCONSIN	1,715	18,942	8,917	37	0	0	0	33	15
WYOMING	2,271	2,282	641	31	0	0	6	1	1
AMERICAN SAMOA	0	0	0	0	0	0	0	0	0
GUAM	179	253	421	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	1,897	1,134	24	0	0	0	2	0	0
U.S. & INSULAR AREAS	298,675	1,114,798	382,842	20,426	14,224	559	1,036	2,920	1,561
50 STATES, D.C. & P.R.	296,599	1,113,411	382,397	20,426	14,224	559	1,034	2,920	1,561

DATA AS OF OCTOBER 1, 1986.

Table EC1

PERCENT OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

LEARNING DISABLED

STATE	PERCENT								
	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	97.60	-	2.40	0.00	-	-	-	-	-
ALASKA	40.41	40.44	17.99	0.64	0.14	0.00	0.02	0.30	0.06
ARIZONA	0.06	90.33	9.49	0.00	0.09	0.00	0.00	0.03	0.00
ARKANSAS	18.69	76.60	4.04	0.01	0.05	0.00	0.05	0.42	0.14
CALIFORNIA	3.57	66.55	29.38	-	0.35	-	-	0.15	-
COLORADO	14.61	77.90	6.84	0.56	0.00	0.00	0.05	0.00	0.03
CONNECTICUT	57.11	22.94	15.83	1.73	2.20	0.00	0.17	0.02	-
DELAWARE	21.30	49.11	21.96	7.15	0.12	0.00	0.06	0.04	0.26
DISTRICT OF COLUMBIA	1.38	77.72	12.20	4.51	4.09	0.03	0.06	0.00	0.00
FLORIDA	14.49	57.95	26.06	0.70	0.74	0.00	0.06	0.00	0.00
GEORGIA	0.69	90.96	8.31	0.00	0.02	0.00	0.01	0.00	0.02
HAWAII	33.14	52.64	13.71	0.00	0.01	0.07	0.00	0.43	0.00
IDAHO	43.28	56.00	0.42	0.01	0.25	0.00	0.00	0.04	0.00
ILLINOIS	6.94	66.21	25.51	1.05	0.16	0.01	0.01	0.06	0.04
INDIANA	1.74	76.11	21.94	0.20	0.00	0.01	0.00	0.00	0.01
IOWA	1.12	81.90	16.95	-	0.00	0.00	-	-	0.03
KANSAS	13.63	77.30	8.49	0.00	0.50	0.00	0.00	0.00	0.08
KENTUCKY	10.67	76.67	11.38	0.85	0.00	0.10	0.00	0.13	0.19
LOUISIANA	20.08	24.55	53.83	0.67	0.72	0.01	-	0.13	0.00
MAINE	6.95	69.60	7.71	1.12	13.72	0.00	0.26	0.00	0.63
MARYLAND	6.70	57.93	31.13	3.42	0.24	0.01	0.00	0.44	0.13
MASSACHUSETTS	8.26	66.52	18.46	1.96	2.80	0.66	0.55	0.09	0.71
MICHIGAN	63.48	17.67	18.43	0.15	0.09	0.03	0.00	0.15	0.00
MINNESOTA	12.75	77.29	5.96	3.67	-	0.00	-	0.05	0.29
MISSISSIPPI	57.03	23.42	17.32	0.27	1.69	0.00	0.09	0.12	0.05
MISSOURI	1.68	87.15	9.42	0.00	1.25	0.04	0.00	0.35	0.11
MONTANA	61.90	28.29	9.67	0.11	0.00	0.00	0.04	0.00	0.00
NEBRASKA	16.91	74.66	7.95	0.00	0.02	0.00	0.00	0.45	0.00
NEVADA	13.11	78.86	7.87	0.06	0.05	0.00	0.00	0.04	0.00
NEW HAMPSHIRE	67.61	20.76	9.28	0.00	1.74	0.01	0.48	0.02	0.10
NEW JERSEY	15.50	39.91	39.78	0.18	4.32	0.03	0.02	0.11	0.15
NEW MEXICO	69.03	22.87	7.83	0.03	0.04	0.00	0.02	0.19	0.00
NEW YORK	0.59	56.99	38.28	3.21	0.39	0.00	0.09	0.38	0.07
NORTH CAROLINA	24.25	68.55	6.86	0.02	0.01	0.02	0.00	0.18	0.10
NORTH DAKOTA	95.23	-	4.42	0.10	-	0.00	0.00	0.06	0.19
OHIO	30.08	50.92	16.16	0.23	2.32	0.00	0.00	0.27	0.03
OKLAHOMA	0.00	94.16	5.38	0.04	0.04	0.11	0.00	0.02	0.26
OREGON	71.85	23.95	2.79	1.09	0.09	0.10	0.08	-	0.05
PENNSYLVANIA	10.85	38.56	46.32	1.05	2.87	0.00	0.02	0.18	0.14
PUERTO RICO	6.78	83.46	8.21	0.12	0.46	0.10	0.05	0.00	0.83
RHODE ISLAND	56.55	15.44	26.83	0.29	0.55	0.00	0.16	0.10	0.08
SOUTH CAROLINA	7.34	74.77	17.27	0.42	0.00	0.00	0.02	0.15	0.03
SOUTH DAKOTA	8.17	90.28	1.11	0.00	0.25	0.02	0.15	0.00	0.02
TENNESSEE	10.26	77.19	11.92	0.36	0.05	0.00	0.01	0.12	0.08
TEXAS	2.20	82.85	9.91	4.34	0.29	0.04	0.08	0.24	0.04
UTAH	38.62	53.99	6.36	0.64	0.04	0.00	0.00	0.21	0.14
VERMONT	45.48	51.28	1.04	0.13	1.49	0.00	0.21	0.00	0.37
VIRGINIA	1.46	69.10	27.52	0.95	0.34	0.03	0.47	0.12	0.01
WASHINGTON	13.42	75.50	10.52	-	0.03	0.00	0.00	0.27	0.26
WEST VIRGINIA	34.95	56.42	8.55	0.01	0.00	0.00	0.00	0.07	0.00
WISCONSIN	5.78	63.87	30.07	0.12	0.00	0.00	0.00	0.11	0.05
WYOMING	43.40	43.61	12.25	0.59	0.00	0.00	0.11	0.02	0.02
AMERICAN SAMOA	-	-	-	-	-	-	-	-	-
GUAM	20.98	29.66	49.36	0.00	0.00	0.00	0.00	0.00	0.00
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	62.05	37.10	0.79	0.00	0.00	0.00	0.07	0.00	0.00
U.S. & INSULAR AREAS	16.26	60.68	20.84	1.11	0.77	0.03	0.06	0.16	0.08
50 STATES, D.C. & P.R.	16.18	60.74	20.86	1.11	0.78	0.03	0.06	0.16	0.09

DATA AS OF OCTOBER 1, 1986.

Table EC1

NUMBER OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

	SPEECH IMPAIRED								
	NUMBER								
STATE	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	19,192	-	181	1	-	-	-	-	-
ALASKA	1,853	670	291	223	21	0	0	0	0
ARIZONA	86	9,991	1,125	0	242	0	0	8	0
ARKANSAS	6,793	2,564	116	1	45	0	0	0	68
CALIFORNIA	85,855	1,290	4,655	-	59	-	-	113	-
COLORADO	5,605	1,619	364	336	10	0	1	0	11
CONNECTICUT	10,081	490	1,056	66	917	0	22	2	-
DELAWARE	1,292	466	7	3	9	0	0	0	0
DISTRICT OF COLUMBIA	1,549	78	65	0	94	0	0	0	0
FLORIDA	44,851	4,984	1,026	85	0	0	5	0	0
GEORGIA	164	24,179	108	45	2	0	1	0	0
HAWAII	2,181	21	175	0	0	0	0	0	0
IDAHO	2,506	1,281	694	1	24	0	0	0	0
ILLINOIS	60,521	6,133	4,865	801	29	1	14	1	8
INDIANA	40,506	0	0	347	0	0	0	0	0
IOWA	10,557	74	542	-	0	0	-	-	2,957
KANSAS	10,673	566	146	0	453	6	10	0	51
KENTUCKY	17,141	6,872	482	256	9	77	0	0	2
LOUISIANA	16,129	96	3,384	110	14	0	-	1	0
MAINE	2,682	1,933	719	104	1,057	0	0	0	122
MARYLAND	2,222	19,292	3,106	533	109	3	0	13	46
MASSACHUSETTS	2,523	20,326	5,640	598	859	201	178	26	216
MICHIGAN	39,434	2,597	420	48	837	0	0	0	0
MINNESOTA	3,467	13,142	637	1,957	-	0	-	2	14
MISSISSIPPI	0	15,930	850	318	147	0	1	2	0
MISSOURI	509	30,556	1,207	0	504	0	0	4	10
MONTANA	4,738	157	37	0	0	0	0	0	0
NEBRASKA	1,539	6,788	723	0	0	0	0	0	0
NEVADA	2,695	232	130	111	0	0	0	0	0
NEW HAMPSHIRE	1,868	380	507	0	49	0	36	0	89
NEW JERSEY	48,749	0	1,437	37	9,973	2	1	22	21
NEW MEXICO	6,243	1,239	1,026	13	16	0	0	7	0
NEW YORK	24,064	3,056	5,887	1,197	2,112	0	12	24	28
NORTH CAROLINA	11,775	14,902	182	19	67	2	0	28	73
NORTH DAKOTA	3,550	-	215	10	-	0	0	0	154
OHIO	47,006	0	0	0	9,463	0	0	14	0
OKLAHOMA	19,362	0	148	47	41	0	0	0	1,054
OREGON	7,979	2,659	362	121	2	14	1	-	23
PENNSYLVANIA	59,707	2,540	4,178	329	0	0	0	0	0
PUERTO RICO	177	457	249	38	0	0	0	0	31
RHODE ISLAND	2,891	64	66	0	5	0	0	0	1
SOUTH CAROLINA	18,236	1,870	42	4	34	0	1	5	1
SOUTH DAKOTA	400	5,072	1	0	3	1	2	0	5
TENNESSEE	25,375	3,006	353	120	9	0	0	6	22
TEXAS	1,503	56,310	6,738	2,952	323	2	15	9	15
UTAH	4,601	3,653	36	42	19	0	0	0	17
VERMONT	2,438	123	336	16	65	0	1	0	157
VIRGINIA	707	28,746	524	4	0	3	0	6	0
WASHINGTON	11,485	329	38	-	92	0	0	0	5
WEST VIRGINIA	12,800	168	152	3	0	0	0	0	0
WISCONSIN	17,605	0	0	0	0	0	0	2	0
WYOMING	2,098	288	59	12	1	1	0	0	1
AMERICAN SAMOA	0	0	0	3	0	0	0	0	0
GUAM	132	27	35	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	1,250	0	0	0	0	0	0	0	0
U.S. & INSULAR AREAS	731,345	297,156	55,322	10,911	27,715	313	293	295	5,232
50 STATES, D.C. & P.R.	729,963	297,129	55,287	10,908	27,715	313	293	295	5,232

DATA AS OF OCTOBER 1, 1986.

Table EC1

PERCENT OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

SPEECH IMPAIRED

STATE	PERCENT								
	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	99.06	-	0.93	0.01	-	-	-	-	-
ALASKA	60.60	21.91	9.52	7.29	0.69	0.00	0.00	0.00	0.00
ARIZONA	0.75	87.24	9.82	0.00	2.11	0.00	0.00	0.07	0.00
ARKANSAS	70.86	26.74	1.21	0.01	0.47	0.00	0.00	0.00	0.71
CALIFORNIA	93.35	1.40	5.06	-	0.06	-	-	0.12	-
COLORADO	70.54	20.38	4.58	4.23	0.13	0.00	0.01	0.00	0.14
CONNECTICUT	79.79	3.88	8.36	0.52	7.26	0.00	0.17	0.02	-
DELAWARE	72.71	26.22	0.39	0.17	0.51	0.00	0.00	0.00	0.00
DISTRICT OF COLUMBIA	86.73	4.37	3.64	0.00	5.26	0.00	0.00	0.00	0.00
FLORIDA	88.03	9.78	2.01	0.17	0.00	0.00	0.01	0.00	0.00
GEORGIA	0.67	98.69	0.44	0.18	0.01	0.00	0.00	0.00	0.00
HAWAII	91.75	0.88	7.36	0.00	0.00	0.00	0.00	0.00	0.00
IDAHO	55.61	28.43	15.40	0.02	0.53	0.00	0.00	0.00	0.00
ILLINOIS	83.62	8.47	6.72	1.11	0.04	0.00	0.02	0.00	0.01
INDIANA	99.15	0.00	0.00	0.85	0.00	0.00	0.00	0.00	0.00
IOWA	74.71	0.52	3.84	-	0.00	0.00	-	-	20.93
KANSAS	89.43	4.74	1.22	0.00	3.80	0.05	0.08	0.00	0.68
KENTUCKY	69.01	27.67	1.94	1.03	0.04	0.31	0.00	0.00	0.01
LOUISIANA	83.41	0.44	15.57	0.51	0.06	0.00	-	0.00	0.00
MAINE	40.53	29.21	10.87	1.57	15.97	0.00	0.00	0.00	1.84
MARYLAND	8.77	76.18	12.27	2.10	0.43	0.01	0.00	0.05	0.18
MASSACHUSETTS	8.26	66.51	18.46	1.96	2.81	0.66	0.56	0.09	0.71
MICHIGAN	91.00	5.99	0.97	0.11	1.93	0.00	0.00	0.00	0.00
MINNESOTA	18.04	68.38	3.31	10.18	-	0.00	-	0.01	0.07
MISSISSIPPI	0.00	92.36	4.93	1.84	0.85	0.00	0.01	0.01	0.00
MISSOURI	1.55	93.19	3.68	0.00	1.54	0.00	0.00	0.01	0.03
MONTANA	96.07	3.18	0.75	0.00	0.00	0.00	0.00	0.00	0.00
NEBRASKA	17.01	75.01	7.99	0.00	0.00	0.00	0.00	0.00	0.00
NEVADA	85.07	7.32	4.10	3.50	0.00	0.00	0.00	0.00	0.00
NEW HAMPSHIRE	63.78	12.97	17.31	0.00	1.67	0.00	1.23	0.00	3.04
NEW JERSEY	80.92	0.00	2.39	0.06	16.55	0.00	0.00	0.04	0.03
NEW MEXICO	73.07	14.50	12.01	0.15	0.19	0.00	0.00	0.08	0.00
NEW YORK	66.15	8.40	16.18	3.29	5.81	0.00	0.03	0.07	0.08
NORTH CAROLINA	43.53	55.09	0.67	0.07	0.25	0.01	0.00	0.10	0.27
NORTH DAKOTA	90.35	-	5.47	0.25	-	0.00	0.00	0.00	3.92
OHIO	83.22	0.00	0.00	0.00	16.75	0.00	0.00	0.02	0.00
OKLAHOMA	93.75	0.00	0.72	0.23	0.20	0.00	0.00	0.00	5.10
OREGON	71.49	23.82	3.24	1.08	0.02	0.13	0.01	-	0.21
PENNSYLVANIA	89.44	3.81	6.26	0.49	0.00	0.00	0.00	0.00	0.00
PUERTO RICO	18.59	48.00	26.16	3.99	0.00	0.00	0.00	0.00	3.26
RHODE ISLAND	95.51	2.11	2.18	0.00	0.17	0.00	0.00	0.00	0.03
SOUTH CAROLINA	90.31	9.26	0.21	0.02	0.17	0.00	0.00	0.02	0.00
SOUTH DAKOTA	7.29	92.49	0.02	0.00	0.05	0.02	0.04	0.00	0.09
TENNESSEE	87.83	10.40	1.22	0.42	0.03	0.00	0.00	0.02	0.08
TEXAS	2.21	82.97	9.93	4.35	0.48	0.00	0.02	0.01	0.02
UTAH	54.98	43.65	0.43	0.50	0.23	0.00	0.00	0.00	0.20
VERMONT	77.74	3.92	10.71	0.51	2.07	0.00	0.03	0.00	5.01
VIRGINIA	2.36	95.85	1.75	0.01	0.00	0.01	0.00	0.02	0.00
WASHINGTON	96.12	2.75	0.32	-	0.77	0.00	0.00	0.00	0.04
WEST VIRGINIA	97.99	0.83	1.16	0.02	0.00	0.00	0.00	0.00	0.00
WISCONSIN	99.99	0.00	0.00	0.00	0.00	0.00	0.00	0.01	0.00
WYOMING	85.28	11.71	2.40	0.49	0.04	0.04	0.00	0.00	0.04
AMERICAN SAMOA	0.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00
GUAM	68.04	13.92	18.04	0.00	0.00	0.00	0.00	0.00	0.00
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	100.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
U.S. & INSULAR AREAS	64.80	26.33	4.90	0.97	2.46	0.03	0.03	0.03	0.46
50 STATES, D.C. & P.R.	64.76	26.36	4.91	0.97	2.46	0.03	0.03	0.03	0.46

DATA AS OF OCTOBER 1, 1986.

Table EC1

NUMBER OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

MENTALLY RETARDED

STATE	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
	NUMBER								
ALABAMA	12,542	-	21,472	8	-	-	-	-	-
ALASKA	38	127	237	32	1	3	0	0	1
ARIZONA	0	4,782	558	0	212	1	10	2	0
ARKANSAS	953	7,698	4,075	173	1,098	398	16	20	26
CALIFORNIA	858	550	25,468	-	220	-	-	16	-
COLORADO	60	1,051	2,896	683	0	137	8	0	53
CONNECTICUT	198	633	3,031	781	163	243	112	2	-
DELAWARE	36	678	391	650	5	0	8	5	11
DISTRICT OF COLUMBIA	0	349	451	362	176	9	27	0	0
FLORIDA	0	770	17,142	7,246	42	82	106	0	0
GEORGIA	121	11,169	13,303	762	2	451	30	1	19
HAWAII	20	297	1,017	55	12	41	0	5	0
IDAHO	10	306	2,312	1	15	0	0	6	0
ILLINOIS	319	2,143	22,138	5,076	1,916	136	828	24	24
INDIANA	15	2,757	16,794	2,965	0	355	2	0	17
IOWA	59	2,743	9,217	-	0	176	-	-	55
KANSAS	35	633	4,846	200	260	121	52	0	23
KENTUCKY	996	10,768	7,417	1,090	28	150	4	11	90
LOUISIANA	531	3,776	3,791	2,832	1,091	690	-	44	0
MAINE	0	2,677	1,292	213	351	114	22	0	2
MARYLAND	38	800	2,604	3,178	250	125	23	26	20
MASSACHUSETTS	2,326	10,735	5,197	550	791	185	156	24	200
MICHIGAN	2,522	11,138	8,995	1,011	70	169	0	29	0
MINNESOTA	253	4,697	7,232	3,209	-	162	-	0	226
MISSISSIPPI	0	5,093	6,575	384	121	330	52	22	67
MISSOURI	100	5,994	11,151	2,265	346	271	0	47	46
MONTANA	195	289	835	80	0	4	2	0	143
NEBRASKA	815	3,604	372	12	1	58	217	19	0
NEVADA	24	355	145	390	6	0	0	0	1
NEW HAMPSHIRE	577	110	223	4	189	3	38	0	2
NEW JERSEY	167	432	6,637	1,776	630	1,220	35	19	36
NEW MEXICO	189	1,023	1,424	34	0	86	0	4	2
NEW YORK	54	2,475	19,785	7,050	1,828	624	397	257	146
NORTH CAROLINA	1,743	13,905	8,213	2,001	101	155	78	58	85
NORTH DAKOTA	196	-	1,449	123	-	0	12	0	25
OHIO	912	5,907	37,908	289	187	8,471	0	287	22
OKLAHOMA	0	5,201	6,193	88	33	499	0	2	58
OREGON	833	305	1,824	650	142	143	142	-	33
PENNSYLVANIA	327	3,261	25,097	4,601	2,496	210	56	263	186
PUERTO RICO	850	11,001	6,493	874	200	35	48	0	778
RHODE ISLAND	15	29	931	1	238	39	19	5	1
SOUTH CAROLINA	1,076	9,228	7,028	1,042	454	536	4	52	134
SOUTH DAKOTA	19	1,843	457	0	111	28	70	0	2
TENNESSEE	350	7,253	7,679	923	457	294	13	7	22
TEXAS	638	23,061	2,862	1,255	83	171	60	33	864
UTAH	265	726	1,810	689	12	1	0	0	19
VERMONT	611	558	1,062	6	86	1	16	0	32
VIRGINIA	63	2,143	11,041	1,049	78	136	66	41	7
WASHINGTON	374	2,793	6,016	-	234	115	0	27	36
WEST VIRGINIA	737	3,543	4,707	802	9	144	2	1	8
WISCONSIN	509	3,404	7,392	631	7	327	0	0	6
WYOMING	49	170	368	73	3	75	11	2	2
AMERICAN SAMOA	8	116	0	42	0	0	0	0	0
GUAM	58	100	376	71	0	0	1	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	36	216	178	0	0	0	72	0	0
U.S. & INSULAR AREAS	33,712	202,615	368,107	58,282	14,755	17,724	2,815	1,361	3,530
50 STATES, D.C. & P.R.	33,610	202,183	367,553	58,169	14,755	17,724	2,742	1,361	3,530

DATA AS OF OCTOBER 1, 1986.

Table EC1

PERCENT OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

MENTALLY RETARDED

PERCENT

STATE	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	36.86	-	63.11	0.02	-	-	-	-	-
ALASKA	6.96	29.47	54.99	7.42	0.23	0.70	0.00	0.00	0.23
ARIZONA	0.00	85.93	10.03	0.00	3.81	0.02	0.18	0.04	0.00
ARKANSAS	6.59	53.25	28.19	1.20	7.59	2.75	0.11	0.14	0.18
CALIFORNIA	3.16	2.03	93.94	-	0.81	-	-	0.06	-
COLORADO	1.23	21.50	59.25	13.97	0.00	2.80	0.16	0.00	1.08
CONNECTICUT	3.83	12.26	58.71	15.13	3.16	4.71	2.17	0.04	-
DELAWARE	2.02	38.00	21.92	36.43	0.28	0.00	0.45	0.28	0.62
DISTRICT OF COLUMBIA	0.00	25.40	32.82	26.35	12.81	0.66	1.97	0.00	0.00
FLORIDA	0.00	3.03	67.52	28.54	0.17	0.32	0.42	0.00	0.00
GEORGIA	0.47	43.19	51.45	2.95	0.01	1.74	0.12	0.00	0.07
HAWAII	1.38	20.53	70.28	3.80	0.83	2.83	0.00	0.35	0.00
IDAHO	0.38	11.55	87.25	0.04	0.57	0.00	0.00	0.23	0.00
ILLINOIS	0.98	6.57	67.90	15.57	5.88	0.42	2.54	0.07	0.07
INDIANA	0.07	12.04	73.32	12.94	0.00	1.55	0.01	0.00	0.07
IOWA	0.48	22.39	75.24	-	0.00	1.44	-	-	0.45
KANSAS	0.57	10.26	78.54	3.24	4.21	1.96	0.84	0.00	0.37
KENTUCKY	4.85	52.39	36.09	5.30	0.14	0.73	0.02	0.05	0.44
LOUISIANA	4.16	29.60	29.72	22.20	8.55	5.41	-	0.34	0.00
MAINE	0.00	57.31	27.66	4.56	7.51	2.44	0.47	0.00	0.04
MARYLAND	0.54	11.33	36.86	44.99	3.54	1.77	0.33	0.37	0.28
MASSACHUSETTS	8.26	66.52	18.45	1.95	2.81	0.66	0.55	0.09	0.71
MICHIGAN	10.54	46.54	37.58	4.22	0.29	0.71	0.00	0.12	0.00
MINNESOTA	1.60	29.77	45.83	20.34	-	1.03	-	0.00	1.43
MISSISSIPPI	0.00	40.28	52.00	3.04	0.96	2.61	0.41	0.17	0.53
MISSOURI	0.49	29.64	55.15	11.20	1.71	1.34	0.00	0.23	0.23
MONTANA	12.60	18.67	53.94	5.17	0.00	0.26	0.13	0.00	9.24
NEBRASKA	15.99	70.69	7.30	0.24	0.02	1.14	4.26	0.37	0.00
NEVADA	2.61	38.55	15.74	42.35	0.65	0.00	0.00	0.00	0.11
NEW HAMPSHIRE	50.35	9.60	19.46	0.35	16.49	0.26	3.32	0.00	0.17
NEW JERSEY	1.52	3.94	60.60	16.22	5.75	11.14	0.32	0.17	0.33
NEW MEXICO	6.84	37.04	51.56	1.23	0.00	3.11	0.00	0.14	0.07
NEW YORK	0.17	7.59	60.66	21.62	5.60	1.91	1.22	0.79	0.45
NORTH CAROLINA	6.62	52.79	31.18	7.60	0.38	0.59	0.30	0.22	0.32
NORTH DAKOTA	10.86	-	80.28	6.81	-	0.00	0.66	0.00	1.39
OHIO	1.69	10.94	70.22	0.54	0.35	15.69	0.00	0.53	0.04
OKLAHOMA	0.00	43.08	51.29	0.73	0.27	4.13	0.00	0.02	0.48
OREGON	20.46	7.49	44.79	15.96	3.49	3.51	3.49	-	0.81
PENNSYLVANIA	0.90	8.93	68.76	12.61	6.84	0.58	0.15	0.72	0.51
PUERTO RICO	4.19	54.25	32.02	4.31	0.99	0.17	0.24	0.00	3.84
RHODE ISLAND	1.17	2.27	72.85	0.08	18.62	3.05	1.49	0.39	0.08
SOUTH CAROLINA	5.50	47.19	35.94	5.33	2.32	2.74	0.02	0.27	0.69
SOUTH DAKOTA	1.10	60.29	26.42	0.00	6.42	1.62	4.05	0.00	0.12
TENNESSEE	2.06	42.67	45.18	5.43	2.69	1.73	0.08	0.04	0.13
TEXAS	2.20	79.45	9.86	4.32	0.29	0.59	0.21	0.11	2.98
UTAH	7.52	20.61	51.39	19.56	0.34	0.03	0.00	0.00	0.54
VERMONT	25.76	23.52	44.77	0.25	3.63	0.04	0.67	0.00	1.35
VIRGINIA	0.43	14.65	75.50	7.17	0.53	0.93	0.45	0.28	0.05
WASHINGTON	3.90	29.11	62.70	-	2.44	1.20	0.00	0.28	0.38
WEST VIRGINIA	7.40	35.60	47.29	8.06	0.09	1.45	0.02	0.01	0.08
WISCONSIN	4.15	27.73	60.22	5.14	0.06	2.66	0.00	0.00	0.05
WYOMING	6.51	22.58	48.87	9.69	0.40	9.96	1.46	0.27	0.27
AMERICAN SAMOA	4.82	69.88	0.00	25.30	0.00	0.00	0.00	0.00	0.00
GUAM	9.57	16.50	62.05	11.72	0.00	0.00	0.17	0.00	0.00
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	7.17	43.03	35.46	0.00	0.00	0.00	14.34	0.00	0.00
U.S. & INSULAR AREAS	4.80	28.83	52.37	8.29	2.10	2.52	0.40	0.19	0.50
50 STATES, D.C. & P.R.	4.79	28.82	52.39	8.29	2.10	2.53	0.39	0.19	0.50

DATA AS OF OCTOBER 1, 1986.

Table EC1

NUMBER OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

EMOTIONALLY DISTURBED

NUMBER

STATE	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	3,854	-	1,249	75	-	-	-	-	-
ALASKA	35	57	191	9	0	1	15	4	3
ARIZONA	0	4,261	427	0	99	0	268	88	0
ARKANSAS	113	152	243	5	123	10	22	2	7
CALIFORNIA	457	404	5,915	-	1,836	-	-	43	-
COLORADO	1,915	3,137	2,480	37	3	53	281	0	302
CONNECTICUT	4,519	1,670	3,663	705	819	73	1,403	918	-
DELAWARE	413	1,082	650	269	7	70	17	218	138
DISTRICT OF COLUMBIA	0	101	238	127	124	0	151	0	0
FLORIDA	1,572	6,287	9,125	2,368	176	83	217	0	0
GEORGIA	123	13,815	2,598	759	0	286	30	27	3
HAWAII	63	129	257	0	3	7	42	7	0
IDAHO	149	162	104	0	33	18	42	16	0
ILLINOIS	2,127	5,960	12,014	6,151	2,266	220	477	568	80
INDIANA	76	970	1,732	388	0	159	26	0	14
IOWA	192	2,075	3,483	-	0	110	-	-	44
KANSAS	94	1,792	1,370	0	45	211	0	665	14
KENTUCKY	272	721	786	560	21	41	25	3	95
LOUISIANA	64	1,203	1,816	343	401	122	-	45	0
MAINE	0	1,494	1,308	481	19	176	345	68	262
MARYLAND	115	545	936	1,462	368	332	126	24	96
MASSACHUSETTS	1,503	12,107	3,359	356	511	119	101	15	129
MICHIGAN	10,373	5,628	3,912	1,510	37	897	0	23	0
MINNESOTA	724	3,140	963	1,702	-	38	-	0	1,217
MISSISSIPPI	0	163	205	28	3	0	59	2	9
MISSOURI	134	4,671	2,771	81	696	94	0	49	64
MONTANA	304	133	240	22	0	28	50	0	4
NEBRASKA	355	1,576	167	0	0	0	49	42	173
NEVADA	35	476	286	100	0	2	0	1	0
NEW HAMPSHIRE	639	201	143	10	173	15	104	5	8
NEW JERSEY	1,053	2,710	6,332	976	3,257	261	89	190	323
NEW MEXICO	945	511	1,223	15	0	66	0	26	0
NEW YORK	465	7,861	23,741	5,435	2,313	790	3,766	890	748
NORTH CAROLINA	1,164	2,419	2,421	374	8	450	91	132	220
NORTH DAKOTA	249	-	89	29	-	6	0	7	9
OHIO	179	325	2,786	3,097	41	338	0	28	243
OKLAHOMA	0	255	703	10	28	92	0	0	35
OREGON	884	296	616	245	105	91	106	-	164
PENNSYLVANIA	647	2,343	8,792	1,213	3,457	55	76	1,135	393
PUERTO RICO	47	304	727	121	4	0	0	0	91
RHODE ISLAND	271	132	458	1	139	0	91	27	12
SOUTH CAROLINA	499	3,346	1,827	165	1	60	42	79	25
SOUTH DAKOTA	39	213	75	0	19	16	127	0	14
TENNESSEE	301	1,014	1,009	179	5	312	8	17	69
TEXAS	439	15,766	1,955	858	57	101	40	90	592
UTAH	4,385	5,426	1,180	398	47	60	0	122	289
VERMONT	162	134	16	42	8	3	32	0	10
VIRGINIA	81	2,088	3,652	1,283	687	263	652	215	11
WASHINGTON	150	1,165	1,248	-	8	91	0	73	15
WEST VIRGINIA	397	591	732	54	11	23	6	35	6
WISCONSIN	1,318	6,936	2,410	48	20	90	1	35	20
WYOMING	257	259	252	38	1	4	42	31	6
AMERICAN SAMOA	0	0	0	2	0	0	0	0	0
GUAM	11	3	34	1	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	20	101	74	0	0	0	34	0	0
U.S. & INSULAR AREAS	44,183	128,302	124,983	32,132	17,979	6,337	9,853	5,965	5,957
50 STATES, D.C. & P.R.	44,152	128,198	124,875	32,129	17,979	6,337	9,819	5,965	5,957

DATA AS OF OCTOBER 1, 1986.

Table EC1

PERCENT OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

	EMOTIONALLY DISTURBED PERCENT								
STATE	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	74.43	-	24.12	1.45	-	-	-	-	-
ALASKA	11.11	18.10	60.63	2.86	0.00	0.32	4.76	1.27	0.95
ARIZONA	0.00	82.85	8.30	0.00	1.92	0.00	5.21	1.71	0.00
ARKANSAS	16.69	22.45	35.89	0.74	18.17	1.48	3.25	0.30	1.03
CALIFORNIA	5.28	4.67	68.34	-	21.21	-	-	0.50	-
COLORADO	23.33	38.22	30.21	0.45	0.04	0.65	3.42	0.00	3.68
CONNECTICUT	32.82	12.13	26.60	5.12	5.95	0.53	10.19	6.67	-
DELAWARE	14.42	37.78	22.70	9.39	0.24	2.44	0.59	7.61	4.82
DISTRICT OF COLUMBIA	0.00	13.63	32.12	17.14	16.73	0.00	20.38	0.00	0.00
FLORIDA	7.93	31.71	46.02	11.94	0.89	0.42	1.09	0.00	0.00
GEORGIA	0.70	78.31	14.73	4.30	0.00	1.62	0.17	0.15	0.02
HAWAII	12.40	25.39	50.59	0.00	0.59	1.38	8.27	1.38	0.00
IDAHO	28.44	30.92	19.85	0.00	6.30	3.44	8.02	3.05	0.00
ILLINOIS	7.12	19.96	40.23	20.60	7.59	0.74	1.60	1.90	0.27
INDIANA	2.26	28.83	51.47	11.53	0.00	4.73	0.77	0.00	0.42
IOWA	3.25	35.15	58.99	-	0.00	1.86	-	-	0.75
KANSAS	2.24	42.76	32.69	0.00	1.07	5.03	0.00	15.87	0.33
KENTUCKY	10.78	28.57	31.14	22.19	0.83	1.62	0.99	0.12	3.76
LOUISIANA	1.60	30.12	45.47	8.59	10.04	3.05	-	1.13	0.00
MAINE	0.00	35.97	31.50	11.58	0.46	4.24	8.31	1.64	6.31
MARYLAND	2.87	13.61	23.38	36.51	9.19	8.29	3.15	0.60	2.40
MASSACHUSETTS	8.26	66.52	18.46	1.96	2.81	0.65	0.55	0.08	0.71
MICHIGAN	46.35	25.15	17.48	6.75	0.17	4.01	0.00	0.10	0.00
MINNESOTA	9.30	40.34	12.37	21.87	-	0.49	-	0.00	15.63
MISSISSIPPI	0.00	34.75	43.71	5.97	0.64	0.00	12.58	0.43	1.92
MISSOURI	1.57	54.57	32.37	0.95	8.13	1.10	0.00	0.57	0.75
MONTANA	38.92	17.03	30.73	2.82	0.00	3.59	6.40	0.00	0.51
NEBRASKA	15.03	66.72	7.07	0.00	0.00	0.00	2.07	1.78	7.32
NEVADA	3.89	52.89	31.78	11.11	0.00	0.22	0.00	0.11	0.00
NEW HAMPSHIRE	49.23	15.49	11.02	0.77	13.33	1.16	8.01	0.39	0.62
NEW JERSEY	6.93	17.84	41.68	6.42	21.44	1.72	0.59	1.25	2.13
NEW MEXICO	33.92	18.34	43.90	0.54	0.00	2.37	0.00	0.93	0.00
NEW YORK	1.01	17.09	51.60	11.81	5.03	1.72	8.19	1.93	1.63
NORTH CAROLINA	15.99	33.23	33.26	5.14	0.11	6.18	1.25	1.81	3.02
NORTH DAKOTA	64.01	-	22.88	7.46	-	1.54	0.00	1.80	2.31
OHIO	2.54	4.62	39.59	44.01	0.58	4.80	0.00	0.40	3.45
OKLAHOMA	0.00	22.71	62.60	0.89	2.49	8.19	0.00	0.00	3.12
OREGON	35.26	11.81	24.57	9.77	4.19	3.63	4.23	-	6.54
PENNSYLVANIA	3.57	12.94	48.55	6.70	19.09	0.30	0.42	6.27	2.17
PUERTO RICO	3.63	23.49	56.18	9.35	0.31	0.00	0.00	0.00	7.03
RHODE ISLAND	23.96	11.67	40.50	0.09	12.29	0.00	8.05	2.39	1.06
SOUTH CAROLINA	8.26	55.36	30.23	2.73	0.02	0.99	0.69	1.31	0.41
SOUTH DAKOTA	7.75	42.35	14.91	0.00	3.78	3.18	25.25	0.00	2.78
TENNESSEE	10.33	34.80	34.63	6.14	0.17	10.71	0.27	0.58	2.37
TEXAS	2.21	79.23	9.83	4.31	0.29	0.51	0.20	0.45	2.98
UTAH	36.83	45.57	9.91	3.34	0.39	0.50	0.00	1.02	2.43
VERMONT	39.80	32.92	3.93	10.32	1.97	0.74	7.86	0.00	2.46
VIRGINIA	0.91	23.31	40.92	14.38	7.70	2.95	7.31	2.41	0.12
WASHINGTON	5.45	42.36	45.38	-	0.29	3.31	0.00	2.65	0.55
WEST VIRGINIA	21.40	31.86	39.46	2.91	0.59	1.24	0.32	1.89	0.32
WISCONSIN	12.12	63.76	22.15	0.44	0.18	0.83	0.01	0.32	0.18
WYOMING	28.88	29.10	28.31	4.27	0.11	0.45	4.72	3.48	0.67
AMERICAN SAMOA	0.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00
GUAM	22.45	6.12	69.39	2.04	0.00	0.00	0.00	0.00	0.00
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	8.73	44.10	32.31	0.00	0.00	0.00	14.85	0.00	0.00
U.S. & INSULAR AREAS	11.79	34.22	33.34	8.57	4.80	1.69	2.41	1.59	1.59
50 STATES, D.C. & P.R.	11.79	34.22	33.33	8.58	4.80	1.69	2.41	1.59	1.59

DATA AS OF OCTOBER 1, 1986.

Table EC1

NUMBER OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

	HARD OF HEARING & DEAF								
	NUMBER								
STATE	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	405	-	295	7	-	-	-	-	-
ALASKA	54	43	54	5	0	0	1	0	0
ARIZONA	5	550	62	178	9	218	0	0	5
ARKANSAS	287	250	75	98	19	161	2	0	1
CALIFORNIA	1,511	199	4,593	-	28	-	-	15	-
COLORADO	312	260	207	15	0	114	0	0	15
CONNECTICUT	261	106	121	120	184	0	46	1	-
DELAWARE	35	17	124	13	5	12	1	0	0
DISTRICT OF COLUMBIA	40	3	16	3	6	0	1	0	0
FLORIDA	0	150	1,540	553	11	595	5	0	0
GEORGIA	26	563	363	351	1	240	2	0	1
HAWAII	43	72	146	31	0	0	0	1	0
IDAHO	70	164	51	4	2	108	0	0	0
ILLINOIS	420	562	2,148	223	14	275	16	0	2
INDIANA	16	271	488	85	0	371	3	0	1
IOWA	243	162	381	-	0	182	-	-	8
KANSAS	128	138	142	0	22	223	0	0	6
KENTUCKY	1,342	328	209	111	8	15	7	0	4
LOUISIANA	202	135	704	44	68	522	-	0	0
MAINE	118	198	25	15	10	56	0	0	8
MARYLAND	144	472	214	210	7	317	0	1	22
MASSACHUSETTS	152	1,237	342	36	51	12	10	2	13
MICHIGAN	987	685	1,076	3	8	196	0	0	0
MINNESOTA	439	457	159	326	-	153	-	0	16
MISSISSIPPI	40	132	125	60	43	275	1	1	0
MISSOURI	585	212	376	0	158	206	0	0	6
MONTANA	108	51	14	6	0	95	0	0	2
NEBRASKA	66	286	31	0	2	60	0	6	0
NEVADA	11	17	103	0	0	0	0	0	0
NEW HAMPSHIRE	151	35	48	2	14	0	19	0	1
NEW JERSEY	107	272	284	468	131	1	2	25	4
NEW MEXICO	134	39	107	2	0	139	0	0	0
NEW YORK	1,095	764	1,000	531	1,354	116	222	13	20
NORTH CAROLINA	568	560	270	62	1	637	0	1	3
NORTH DAKOTA	76	-	49	61	-	0	0	0	5
OHIO	417	235	1,492	214	7	151	0	0	2
OKLAHOMA	0	272	280	61	57	189	20	0	28
OREGON	460	161	41	13	87	92	86	-	6
PENNSYLVANIA	1,880	151	895	177	882	46	238	0	11
PUERTO RICO	80	185	722	22	168	2	9	0	28
RHODE ISLAND	30	21	16	131	3	0	6	0	0
SOUTH CAROLINA	347	196	351	9	0	173	1	0	5
SOUTH DAKOTA	26	104	1	6	1	31	4	0	0
TENNESSEE	668	276	225	256	18	313	5	0	2
TEXAS	101	3,622	449	197	14	441	7	3	134
UTAH	154	177	16	358	0	2	1	0	3
VERMONT	86	23	17	0	13	0	53	0	1
VIRGINIA	13	623	540	63	3	300	0	0	0
WASHINGTON	60	672	689	-	15	184	0	0	13
WEST VIRGINIA	100	49	173	0	3	154	1	0	0
WISCONSIN	267	462	147	3	3	201	0	0	2
WYOMING	63	47	13	2	0	1	4	0	0
AMERICAN SAMOA	0	0	9	1	0	0	0	0	0
GUAM	0	3	29	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	8	21	0	0	0	2	0	0	0
U.S. & INSULAR AREAS	14,941	16,690	22,047	5,136	3,430	7,581	773	69	378
50 STATES, D.C. & P.R.	14,933	16,666	22,009	5,135	3,430	7,579	773	69	378

DATA AS OF OCTOBER 1, 1986.

Table EC1

PERCENT OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

HARD OF HEARING & DEAF

STATE	PERCENT								
	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	57.28	-	41.73	0.99	-	-	-	-	-
ALASKA	34.39	27.39	34.39	3.18	0.00	0.00	0.64	0.00	0.00
ARIZONA	0.49	53.55	6.04	17.33	0.88	21.23	0.00	0.00	0.49
ARKANSAS	32.14	28.00	8.40	10.97	2.13	18.03	0.22	0.00	0.11
CALIFORNIA	23.81	3.14	72.38	-	0.44	-	-	0.24	-
COLORADO	33.80	28.17	22.43	1.63	0.00	12.35	0.00	0.00	1.63
CONNECTICUT	31.11	12.63	14.42	14.30	21.93	0.00	5.48	0.12	-
DELAWARE	16.91	8.21	59.90	6.28	2.42	5.80	0.48	0.00	0.00
DISTRICT OF COLUMBIA	57.97	4.35	23.19	4.35	8.70	0.00	1.45	0.00	0.00
FLORIDA	0.00	5.26	53.96	19.38	0.39	20.85	0.18	0.00	0.00
GEORGIA	1.68	36.39	23.46	22.69	0.06	15.51	0.13	0.00	0.06
HAWAII	14.68	24.57	49.83	10.58	0.00	0.00	0.00	0.34	0.00
IDAHO	17.54	41.10	12.78	1.00	0.50	27.07	0.00	0.00	0.00
ILLINOIS	11.48	15.36	58.69	6.09	0.38	7.51	0.44	0.00	0.05
INDIANA	1.30	21.94	39.51	6.88	0.00	30.04	0.24	0.00	0.08
IOWA	24.90	16.60	39.04	-	0.00	18.65	-	-	0.82
KANSAS	19.42	20.94	21.55	0.00	3.34	33.84	0.00	0.00	0.91
KENTUCKY	66.30	16.21	10.33	5.48	0.40	0.74	0.35	0.00	0.20
LOUISIANA	12.06	8.06	42.03	2.63	4.06	31.16	-	0.00	0.00
MAINE	27.44	46.05	5.81	3.49	2.33	13.02	0.00	0.00	1.86
MARYLAND	10.38	34.03	15.43	15.14	0.50	22.86	0.00	0.07	1.59
MASSACHUSETTS	8.19	66.68	18.44	1.94	2.75	0.65	0.54	0.11	0.70
MICHIGAN	33.40	23.18	36.41	0.10	0.27	6.63	0.00	0.00	0.00
MINNESOTA	28.32	29.48	10.26	21.03	-	9.87	-	0.00	1.03
MISSISSIPPI	5.91	19.50	18.46	8.86	6.35	40.62	0.15	0.15	0.00
MISSOURI	37.91	13.74	24.37	0.00	10.24	13.35	0.00	0.00	0.39
MONTANA	39.13	18 48	5.07	2.17	0.00	34.42	0.00	0.00	0.72
NEBRASKA	14.63	63.41	6.87	0.00	0.44	13.30	0.00	1.33	0.00
NEVADA	8.40	12.98	78.63	0.00	0.00	0.00	0.00	0.00	0.00
NEW HAMPSHIRE	55.93	12.96	17.78	0.74	5.19	0.00	7.04	0.00	0.37
NEW JERSEY	8.27	21.02	21.95	36.17	10.12	0.08	0.15	1.93	0.31
NEW MEXICO	31.83	9.26	25.42	0.48	0.00	33.02	0.00	0.00	0.00
NEW YORK	21.41	14.94	19.55	10.38	26.47	2.27	4.34	0.25	0.39
NORTH CAROLINA	27.02	26.64	12.84	2.95	0.05	30.30	0.00	0.05	0.14
NORTH DAKOTA	39.79	-	25.65	31.94	-	0.00	0.00	0.00	2.62
OHIO	16.56	9.33	59.25	8.50	0.28	6.00	0.00	0.00	0.08
OKLAHOMA	0.00	29.99	30.87	6.73	6.28	20.84	2.21	0.00	3.09
OREGON	48.63	17.02	4.33	1.37	9.20	9.73	9.09	-	0.63
PENNSYLVANIA	43.93	3.53	20.91	4.14	20.61	1.07	5.56	0.00	0.26
PUERTO RICO	6.58	15.21	59.37	1.81	13.82	0.16	0.74	0.00	2.30
RHODE ISLAND	14.49	10.14	7.73	63.29	1.45	0.00	2.90	0.00	0.00
SOUTH CAROLINA	32.07	18.11	32.44	0.83	0.00	15.99	0.09	0.00	0.46
SOUTH DAKOTA	15.03	60.12	0.58	3.47	0.58	17.92	2.31	0.00	0.00
TENNESSEE	37.89	15.66	12.76	14.52	1.02	17.75	0.28	0.00	0.11
TEXAS	2.03	72.91	9.04	3.97	0.28	8.88	0.14	0.06	2.70
UTAH	21.66	24.89	2.25	50.35	0.00	0.28	0.14	0.00	0.42
VERMONT	44.56	11.92	8.81	0.00	6.74	0.00	27.46	0.00	0.52
VIRGINIA	8.84	40.40	35.02	4.09	0.19	19.46	0.00	0.00	0.00
WASHINGTON	3.67	41.15	42.19	-	0.92	11.27	0.00	0.00	0.80
WEST VIRGINIA	20.83	10.21	36.04	0.00	0.63	32.08	0.21	0.00	0.00
WISCONSIN	24.61	42.58	13.55	0.28	0.28	18.53	0.00	0.00	0.18
WYOMING	48.46	36.15	10.00	1.54	0.00	0.77	3.08	0.00	0.00
AMERICAN SAMOA	0.00	0.00	90.00	10.00	0.00	0.00	0.00	0.00	0.00
GUAM	0.00	9.38	90.62	0.00	0.00	0.00	0.00	0.00	0.00
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	25.81	67.74	0.00	0.00	0.00	6.45	0.00	0.00	0.00
U.S. & INSULAR AREAS	21.03	23.49	31.03	7.23	4.83	10.67	1.09	0.10	0.53
50 STATES, D.C. & P.R.	21.04	23.48	31.01	7.24	4.83	10.68	1.09	0.10	0.53

DATA AS OF OCTOBER 1, 1986.

Table EC1

NUMBER OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

MULTIHANDICAPPED

NUMBER

STATE	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	41	-	866	2	-	-	-	-	-
ALASKA	11	34	120	21	0	0	1	0	1
ARIZONA	0	575	78	0	162	47	3	0	0
ARKANSAS	94	122	220	22	107	5	10	0	23
CALIFORNIA	208	67	4,616	-	242	-	-	27	-
COLORADO	91	368	1,025	472	1	62	10	0	152
CONNECTICUT	53	51	312	189	126	12	95	6	-
DELAWARE	1	3	41	22	1	2	11	7	0
DISTRICT OF COLUMBIA	9	3	16	48	0	8	2	0	0
FLORIDA	0	0	0	0	234	272	135	0	0
GEORGIA	0	41	0	0	0	30	0	0	0
HAWAII	2	0	203	25	9	3	0	0	0
IDAHO	0	0	57	0	10	80	0	0	0
ILLINOIS	-	-	-	-	-	-	-	-	-
INDIANA	0	0	534	585	0	154	7	0	8
IOWA	4	0	649	-	0	0	-	-	0
KANSAS	0	4	250	0	58	257	6	0	36
KENTUCKY	13	74	509	426	56	62	4	26	58
LOUISIANA	0	0	432	206	49	512	-	0	0
MAINE	0	80	411	85	59	45	34	0	6
MARYLAND	19	227	350	2,233	315	173	82	31	46
MASSACHUSETTS	242	1,944	541	57	82	18	16	3	21
MICHIGAN	105	0	951	131	7	183	0	0	0
MINNESOTA	-	-	-	-	-	0	-	0	-
MISSISSIPPI	0	20	241	33	20	10	10	0	19
MISSOURI	11	97	335	63	214	12	0	3	12
MONTANA	95	48	164	64	0	23	0	0	33
NEBRASKA	64	279	30	0	0	58	-	-	0
NEVADA	4	6	308	66	0	0	0	0	0
NEW HAMPSHIRE	70	11	35	4	66	4	30	0	4
NEW JERSEY	170	437	4,326	1,230	1,310	186	29	52	54
NEW MEXICO	63	115	561	23	8	1	0	2	11
NEW YORK	53	451	3,242	2,309	3,142	2	568	73	111
NORTH CAROLINA	45	216	599	176	51	456	282	22	45
NORTH DAKOTA	-	-	-	-	-	-	-	-	-
OHIO	23	50	2,857	472	19	0	0	0	42
OKLAHOMA	0	114	804	88	71	359	161	0	108
OREGON	78	97	462	153	11	11	11	-	94
PENNSYLVANIA	1	55	88	100	18	2	33	0	2
PUERTO RICO	43	221	498	26	75	24	12	0	2,362
RHODE ISLAND	1	1	9	0	20	27	5	0	0
SOUTH CAROLINA	11	15	87	68	23	158	0	0	9
SOUTH DAKOTA	20	148	143	0	20	58	86	0	11
TENNESSEE	31	101	432	923	113	110	1	0	41
TEXAS	80	2,831	385	553	40	7	89	0	107
UTAH	12	17	333	902	12	2	0	0	19
VERMONT	6	8	119	8	9	4	1	0	8
VIRGINIA	9	116	1,118	717	7	634	2	0	23
WASHINGTON	0	195	1,110	-	220	284	0	0	19
WEST VIRGINIA	0	0	17	8	0	0	0	0	0
WISCONSIN	86	264	202	70	0	0	0	0	0
WYOMING	71	123	48	16	7	21	14	0	5
AMERICAN SAMOA	0	0	0	11	0	0	0	0	0
GUAM	0	1	16	89	0	0	0	0	6
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	8	83	46	0	0	0	58	0	0
U.S. & INSULAR AREAS	1,948	9,713	30,796	12,696	6,994	4,378	1,808	252	3,496
50 STATES, D.C. & P.R.	1,940	9,629	30,734	12,596	6,994	4,378	1,750	252	3,490

DATA AS OF OCTOBER 1, 1986.

Table EC1

PERCENT OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

MULTIHANDICAPPED
PERCENT

STATE	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	4.51	-	95.27	0.22	-	-	-	-	-
ALASKA	5.85	18.09	63.83	11.17	0.00	0.00	0.53	0.00	0.53
ARIZONA	0.00	66.47	9.02	0.00	18.73	5.43	0.35	0.00	0.00
ARKANSAS	15.59	20.23	36.48	3.65	17.74	0.63	1.66	0.00	3.81
CALIFORNIA	4.03	1.38	89.46	-	4.69	-	-	0.52	-
COLORADO	4.17	16.87	47.00	21.64	0.05	2.84	0.46	0.00	6.97
CONNECTICUT	6.28	6.04	36.97	22.39	14.93	1.42	11.26	0.71	-
DELAWARE	1.14	3.41	46.59	25.00	1.14	2.27	12.50	7.95	0.00
DISTRICT OF COLUMBIA	10.47	3.49	18.60	55.81	0.00	9.30	2.33	0.00	0.00
FLORIDA	0.00	0.00	0.00	0.00	36.51	42.43	21.06	0.00	0.00
GEORGIA	0.00	57.75	0.00	0.00	0.00	42.25	0.00	0.00	0.00
HAWAII	0.83	0.00	83.88	10.33	3.72	1.24	0.00	0.00	0.00
IDAHO	0.00	0.00	38.78	0.00	6.80	54.42	0.00	0.00	0.00
ILLINOIS	-	-	-	-	-	-	-	-	-
INDIANA	0.00	0.00	41.46	45.42	0.00	11.96	0.54	0.00	0.62
IOWA	0.61	0.00	99.39	-	0.00	0.00	-	-	0.00
KANSAS	0.00	0.65	40.92	0.00	9.49	42.06	0.98	0.00	5.89
KENTUCKY	1.06	6.03	41.45	34.69	4.56	5.05	0.33	2.12	4.72
LOUISIANA	0.00	0.00	36.03	17.18	4.09	42.70	-	0.00	0.00
MAINE	0.00	11.11	57.08	11.81	8.19	6.25	4.72	0.00	0.83
MARYLAND	0.55	6.53	10.07	64.24	9.06	4.98	2.36	0.89	1.32
MASSACHUSETTS	8.28	66.48	18.50	1.95	2.80	0.62	0.55	0.10	0.72
MICHIGAN	7.63	0.00	69.06	9.51	0.51	13.29	0.00	0.00	0.00
MINNESOTA	-	-	-	-	-	-	-	-	-
MISSISSIPPI	0.00	5.67	68.27	9.35	5.67	2.83	2.83	0.00	5.38
MISSOURI	1.47	12.99	44.85	8.43	28.65	1.61	0.00	0.40	1.61
MONTANA	22.25	11.24	38.41	14.99	0.00	5.39	0.00	0.00	7.73
NEBRASKA	14.85	64.73	6.96	0.00	0.00	13.46	-	-	0.00
NEVADA	1.04	1.56	80.21	17.19	0.00	0.00	0.00	0.00	0.00
NEW HAMPSHIRE	31.25	4.91	15.62	1.79	29.46	1.79	13.39	0.00	1.79
NEW JERSEY	2.18	5.61	55.58	15.78	16.81	2.39	0.37	0.67	0.69
NEW MEXICO	8.04	14.67	71.56	2.93	1.02	0.13	0.00	0.26	1.40
NEW YORK	0.53	4.53	32.58	23.20	31.57	0.02	5.71	0.73	1.12
NORTH CAROLINA	2.38	11.42	31.66	9.30	2.70	24.10	14.90	1.16	2.38
NORTH DAKOTA	-	-	-	-	-	-	-	-	-
OHIO	0.66	1.44	82.50	13.63	0.55	0.00	0.00	0.00	1.21
OKLAHOMA	0.00	6.69	47.16	5.16	4.16	21.06	9.44	0.00	6.33
OREGON	8.51	10.58	50.38	16.68	1.20	1.20	1.20	-	10.25
PENNSYLVANIA	0.33	18.39	29.43	33.44	6.02	0.67	11.04	0.00	0.67
PUERTO RICO	1.32	6.78	15.27	0.80	2.30	0.74	0.37	0.00	72.43
RHODE ISLAND	1.59	1.59	14.29	0.00	31.75	42.86	7.94	0.00	0.00
SOUTH CAROLINA	2.96	4.04	23.45	18.33	6.20	42.59	0.00	0.00	2.43
SOUTH DAKOTA	4.12	30.45	29.42	0.00	4.12	11.93	17.70	0.00	2.26
TENNESSEE	1.77	5.76	24.66	52.68	6.45	6.28	0.06	0.00	2.34
TEXAS	1.96	69.18	9.41	13.51	0.98	0.17	2.17	0.00	2.01
UTAH	0.93	1.31	25.67	69.55	0.93	0.15	0.00	0.00	1.46
VERMONT	3.68	4.91	73.01	4.91	5.52	2.45	0.61	0.00	4.91
VIRGINIA	0.34	4.42	42.57	27.30	0.27	24.14	0.08	0.00	0.88
WASHINGTON	0.00	10.67	60.72	-	12.04	15.54	0.00	0.00	1.04
WEST VIRGINIA	0.00	0.00	68.00	32.00	0.00	0.00	0.00	0.00	0.00
WISCONSIN	13.83	42.44	32.48	11.25	0.00	0.00	0.00	0.00	0.00
WYOMING	23.28	40.33	15.74	5.25	2.30	6.89	4.59	0.00	1.64
AMERICAN SAMOA	0.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00
GUAM	0.00	0.89	14.29	79.46	0.00	0.00	0.00	0.00	5.36
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	4.10	42.56	23.59	0.00	0.00	0.00	29.74	0.00	0.00
U.S. & INSULAR AREAS	2.70	13.48	42.72	17.61	9.70	6.07	2.51	0.35	4.85
50 STATES, D.C. & P.R.	2.70	13.42	42.83	17.55	9.75	6.10	2.44	0.35	4.86

DATA AS OF OCTOBER 1, 1986.

Table EC1

NUMBER OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

ORTHOPEDICALLY IMPAIRED

NUMBER

STATE	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	241	-	141	1	-	-	-	-	-
ALASKA	38	65	88	17	0	0	0	0	1
ARIZONA	87	313	34	0	96	1	0	0	0
ARKANSAS	48	33	26	0	56	2	4	1	5
CALIFORNIA	2,430	299	4,157	-	24	-	-	0	-
COLORADO	248	171	151	198	0	0	0	0	117
CONNECTICUT	99	33	90	40	50	0	4	0	-
DELAWARE	15	14	45	181	3	10	0	0	9
DISTRICT OF COLUMBIA	0	1	3	66	3	1	0	0	0
FLORIDA	86	342	1,717	271	42	0	120	0	0
GEORGIA	18	360	407	38	0	0	1	0	18
HAWAII	87	63	235	75	0	0	0	0	26
IDAHO	121	30	42	2	6	0	0	0	0
ILLINOIS	330	199	1,492	1,633	183	80	61	0	180
INDIANA	103	83	260	159	0	0	0	0	0
IOWA	393	137	391	-	0	6	-	-	116
KANSAS	213	40	64	0	92	0	24	0	77
KENTUCKY	135	205	122	92	1	35	3	0	58
LOUISIANA	188	62	319	120	62	90	-	0	0
MAINE	30	83	150	30	114	0	3	0	19
MARYLAND	19	216	115	271	30	1	0	2	141
MASSACHUSETTS	121	972	271	29	42	11	8	1	9
MICHIGAN	-	-	-	-	-	-	-	-	-
MINNESOTA	245	598	122	454	-	0	-	0	48
MISSISSIPPI	82	27	133	23	13	57	4	0	74
MISSOURI	347	275	562	72	125	7	0	0	53
MONTANA	66	24	9	16	0	0	0	0	18
NEBRASKA	104	458	49	0	0	0	0	1	0
NEVADA	11	23	191	32	0	0	0	0	0
NEW HAMPSHIRE	75	19	30	0	12	0	4	0	3
NEW JERSEY	80	203	131	158	168	0	7	0	20
NEW MEXICO	148	62	136	11	0	0	0	0	1
NEW YORK	589	335	1,049	405	877	4	33	7	53
NORTH CAROLINA	247	199	229	220	1	0	0	0	60
NORTH DAKOTA	48	-	24	29	-	0	28	0	20
OHIO	382	96	1,243	335	20	0	0	0	1,569
OKLAHOMA	216	0	123	88	9	34	0	0	38
OREGON	450	156	59	186	2	2	1	-	153
PENNSYLVANIA	136	47	680	712	419	4	30	0	203
PUERTO RICO	80	53	37	12	44	0	0	0	144
RHODE ISLAND	42	43	60	0	54	0	3	0	3
SOUTH CAROLINA	182	157	574	66	6	2	1	0	27
SOUTH DAKOTA	17	93	4	0	7	4	18	0	9
TENNESSEE	205	106	132	291	33	0	0	1	290
TEXAS	91	3,258	404	178	11	11	8	0	124
UTAH	69	102	109	37	0	0	0	0	60
VERMONT	51	24	24	2	7	0	0	0	3
VIRGINIA	4	238	223	93	1	49	0	0	30
WASHINGTON	120	269	80	-	234	2	0	0	32
WEST VIRGINIA	89	18	119	49	0	0	0	0	8
WISCONSIN	123	53	451	15	0	0	0	0	142
WYOMING	74	15	1	17	0	3	4	0	1
AMERICAN SAMOA	0	0	0	1	0	0	0	0	0
GUAM	14	8	2	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	26	0	0	0	0	0	5	0	0
U.S. & INSULAR AREAS	9,463	10,680	17,310	6,725	2,847	416	374	13	3,962
50 STATES, D.C. & P.R.	9,423	10,672	17,308	6,724	2,847	416	369	13	3,962

DATA AS OF OCTOBER 1, 1986.

Table EC1

PERCENT OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

ORTHOPEDICALLY IMPAIRED

STATE	PERCENT								
	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	62.92	-	36.81	0.26	-	-	-	-	-
ALASKA	18.18	31.10	42.11	8.13	0.00	0.00	0.00	0.00	0.48
ARIZONA	16.38	58.95	6.40	0.00	18.08	0.19	0.00	0.00	0.00
ARKANSAS	27.43	18.86	14.86	0.00	32.00	1.14	2.29	0.57	2.86
CALIFORNIA	35.17	4.33	60.16	-	0.35	-	-	0.00	-
COLORADO	28.02	19.32	17.06	22.37	0.00	0.00	0.00	0.00	13.22
CONNECTICUT	31.33	10.44	28.48	12.66	15.82	0.00	1.27	0.00	-
DELAWARE	5.42	5.05	16.25	65.34	1.08	3.61	0.00	0.00	3.25
DISTRICT OF COLUMBIA	0.00	1.35	4.05	89.19	4.05	1.35	0.00	0.00	0.00
FLORIDA	3.34	13.27	66.60	10.51	1.63	0.00	4.65	0.00	0.00
GEORGIA	2.14	42.76	48.34	4.51	0.00	0.00	0.12	0.00	2.14
HAWAII	17.90	12.96	48.35	15.43	0.00	0.00	0.00	0.00	5.35
IDAHO	60.20	14.93	20.90	1.00	2.99	0.00	0.00	0.00	0.00
ILLINOIS	7.94	4.79	35.88	39.27	4.40	1.92	1.47	0.00	4.33
INDIANA	17.02	13.72	42.98	26.28	0.00	0.00	0.00	0.00	0.00
IOWA	37.68	13.14	37.49	-	0.00	0.58	-	-	11.12
KANSAS	41.76	7.84	12.55	0.00	18.04	0.00	4.71	0.00	15.10
KENTUCKY	20.74	31.49	18.74	14.13	0.15	5.38	0.46	0.00	8.91
LOUISIANA	22.35	7.37	37.93	14.27	7.37	10.70	-	0.00	0.00
MAINE	6.99	19.35	34.97	6.99	26.57	0.00	0.70	0.00	4.43
MARYLAND	2.39	27.17	14.47	34.09	3.77	0.13	0.00	0.25	17.74
MASSACHUSETTS	8.27	66.39	18.51	1.98	2.87	0.75	0.55	0.07	0.61
MICHIGAN	-	-	-	-	-	-	-	-	-
MINNESOTA	16.70	40.76	8.32	30.95	-	0.00	-	0.00	3.27
MISSISSIPPI	19.85	6.54	32.20	5.57	3.15	13.80	0.97	0.00	17.92
MISSOURI	24.08	19.08	39.00	5.00	8.67	0.49	0.00	0.00	3.68
MONTANA	49.62	18.05	6.77	12.03	0.00	0.00	0.00	0.00	13.53
NEBRASKA	16.99	74.84	8.01	0.00	0.00	0.00	0.00	0.16	0.00
NEVADA	4.28	8.95	74.32	12.45	0.00	0.00	0.00	0.00	0.00
NEW HAMPSHIRE	52.45	13.29	20.98	0.00	8.39	0.00	2.80	0.00	2.10
NEW JERSEY	10.43	26.47	17.08	20.60	21.90	0.00	0.91	0.00	2.61
NEW MEXICO	41.34	17.32	37.99	3.07	0.00	0.00	0.00	0.00	0.28
NEW YORK	17.57	9.99	31.29	12.08	26.16	0.12	0.98	0.21	1.58
NORTH CAROLINA	25.84	20.82	23.95	23.01	0.10	0.00	0.00	0.00	6.28
NORTH DAKOTA	32.21	-	16.11	19.46	-	0.00	18.79	0.00	13.42
OHIO	10.48	2.63	34.10	9.19	0.55	0.00	0.00	0.00	43.05
OKLAHOMA	42.52	0.00	24.21	17.32	1.77	6.69	0.00	0.00	7.48
OREGON	44.60	15.46	5.85	18.43	0.20	0.20	0.10	-	15.16
PENNSYLVANIA	6.10	2.11	30.48	31.91	18.78	0.18	1.34	0.00	9.10
PUERTO RICO	21.62	14.32	10.00	3.24	11.89	0.00	0.00	0.00	38.92
RHODE ISLAND	20.49	20.98	29.27	0.00	26.34	0.00	1.46	0.00	1.46
SOUTH CAROLINA	17.93	15.47	56.55	6.50	0.59	0.20	0.10	0.00	2.66
SOUTH DAKOTA	11.18	61.18	2.63	0.00	4.61	2.63	11.84	0.00	5.92
TENNESSEE	19.38	10.02	12.48	27.50	3.12	0.00	0.00	0.09	27.41
TEXAS	2.23	79.76	9.89	4.36	0.27	0.27	0.20	0.00	3.04
UTAH	18.30	27.06	28.91	9.81	0.00	0.00	0.00	0.00	15.92
VERMONT	45.95	21.62	21.62	1.80	6.31	0.00	0.00	0.00	2.70
VIRGINIA	0.63	37.30	34.95	14.58	0.16	7.68	0.00	0.00	4.70
WASHINGTON	16.28	36.50	10.85	-	31.75	0.27	0.00	0.00	4.34
WEST VIRGINIA	31.45	6.36	42.05	17.31	0.00	0.00	0.00	0.00	2.83
WISCONSIN	15.69	6.76	57.53	1.91	0.00	0.00	0.00	0.00	18.11
WYOMING	64.35	13.04	0.87	14.78	0.00	2.61	3.48	0.00	0.87
AMERICAN SAMOA	0.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00
GUAM	58.33	33.33	8.33	0.00	0.00	0.00	0.00	0.00	0.00
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	83.87	0.00	0.00	0.00	0.00	0.00	16.13	0.00	0.00
U.S. & INSULAR AREAS	18.27	20.62	33.42	12.99	5.50	0.80	0.72	0.03	7.65
50 STATES, D.C. & P.R.	18.21	20.63	33.46	13.00	5.50	0.80	0.71	0.03	7.66

DATA AS OF OCTOBER 1, 1986.

Table EC1

NUMBER OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

OTHER HEALTH IMPAIRED

STATE	NUMBER								
	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	151	-	48	0	-	-	-	-	-
ALASKA	42	53	23	3	0	0	0	0	0
ARIZONA	0	0	0	0	0	0	0	0	475
ARKANSAS	50	293	24	4	20	0	0	0	17
CALIFORNIA	9,663	643	1,963	-	83	-	-	1	-
COLORADO	0	0	0	0	0	0	0	0	0
CONNECTICUT	290	105	325	101	94	0	59	0	-
DELAWARE	15	4	6	5	0	1	0	0	23
DISTRICT OF COLUMBIA	0	0	2	77	12	0	0	0	0
FLORIDA	1	0	180	215	10	0	67	0	1,901
GEORGIA	16	168	20	20	0	0	1	0	238
HAWAII	0	0	3	3	3	0	0	0	0
IDAHO	42	46	30	2	16	0	0	0	0
ILLINOIS	251	147	412	241	121	2	12	0	632
INDIANA	0	39	35	44	0	0	0	0	0
IOWA	0	0	0	-	0	9	-	-	0
KANSAS	103	9	14	0	21	0	2	0	224
KENTUCKY	62	37	45	105	0	119	2	0	359
LOUISIANA	110	125	721	15	65	211	-	0	328
MAINE	0	221	87	15	49	0	0	0	73
MARYLAND	42	203	110	150	26	9	30	0	216
MASSACHUSETTS	153	1,237	343	37	52	12	11	1	14
MICHIGAN	1,730	241	2,448	278	124	1	0	0	0
MINNESOTA	112	346	55	332	-	0	-	0	37
MISSISSIPPI	-	-	-	-	-	-	-	-	-
MISSOURI	745	275	64	0	92	11	0	0	376
MONTANA	107	19	19	0	0	2	0	0	1
NEBRASKA	-	-	-	-	-	-	-	-	-
NEVADA	4	1	0	0	0	0	0	0	104
NEW HAMPSHIRE	169	19	52	0	31	0	3	0	4
NEW JERSEY	64	165	378	3	13	0	1	0	202
NEW MEXICO	82	1,131	25	0	0	0	0	1	6
NEW YORK	1,394	4,234	13,655	395	396	6	173	12	204
NORTH CAROLINA	320	312	379	98	29	0	0	0	235
NORTH DAKOTA	21	-	9	5	-	0	1	0	13
OHIO	-	-	-	-	-	-	0	-	-
OKLAHOMA	98	0	27	30	19	28	0	0	96
OREGON	250	88	50	142	2	3	2	-	365
PENNSYLVANIA	0	0	0	0	0	0	1	0	0
PUERTO RICO	76	68	30	0	4	0	2	0	248
RHODE ISLAND	20	7	19	0	0	0	1	0	109
SOUTH CAROLINA	25	5	93	60	1	1	0	0	17
SOUTH DAKOTA	2	16	8	0	2	1	1	0	13
TENNESSEE	73	121	121	56	7	0	18	0	1,233
TEXAS	181	6,559	814	358	25	12	17	0	246
UTAH	49	82	8	18	0	0	0	0	83
VERMONT	54	37	19	1	13	0	4	0	0
VIRGINIA	5	81	82	76	3	100	3	1	55
WASHINGTON	343	1,285	1,015	-	91	0	0	0	33
WEST VIRGINIA	44	4	46	9	0	0	2	0	7
WISCONSIN	124	137	128	0	0	0	0	0	0
WYOMING	93	76	12	9	0	3	0	0	2
AMERICAN SAMOA	0	0	0	0	0	0	0	0	0
GUAM	0	2	1	0	0	0	0	0	2
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	21	3	4	0	0	0	0	0	0
U.S. & INSULAR AREAS	17,197	18,644	23,952	2,907	1,424	531	413	16	8,191
50 STATES, D.C. & P.R.	17,176	18,639	23,947	2,907	1,424	531	413	16	8,189

DATA AS OF OCTOBER 1, 1986.

Table EC1

PERCENT OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS
DURING SCHOOL YEAR 1984-1985

	OTHER HEALTH IMPAIRED PERCENT								
STATE	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	75.88	-	24.12	0.00	-	-	-	-	-
ALASKA	34.71	43.80	19.01	2.48	0.00	0.00	0.00	0.00	0.00
ARIZONA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	100.00
ARKANSAS	12.25	71.81	5.88	0.98	4.90	0.00	0.00	0.00	4.17
CALIFORNIA	78.22	5.21	15.89	-	0.67	-	-	0.01	-
COLORADO	-	-	-	-	-	-	-	-	-
CONNECTICUT	29.77	10.78	33.37	10.37	9.65	0.00	6.06	0.00	-
DELAWARE	27.78	7.41	11.11	9.26	0.00	1.85	0.00	0.00	42.59
DISTRICT OF COLUMBIA	0.00	0.00	2.20	84.62	13.19	0.00	0.00	0.00	0.00
FLORIDA	0.04	0.00	7.58	9.06	0.42	0.00	2.82	0.00	80.08
GEORGIA	3.46	36.29	4.32	4.32	0.00	0.00	0.22	0.00	51.40
HAWAII	0.00	0.00	33.33	33.33	33.33	0.00	0.00	0.00	0.00
IDAHO	30.88	33.82	22.06	1.47	11.76	0.00	0.00	0.00	0.00
ILLINOIS	13.81	8.09	22.66	13.26	6.66	0.11	0.66	0.00	34.76
INDIANA	0.00	33.05	29.66	37.29	0.00	0.00	0.00	0.00	0.00
IOWA	0.00	0.00	0.00	-	0.00	100.00	-	-	0.00
KANSAS	27.61	2.41	3.75	0.00	5.63	0.00	0.54	0.00	60.05
KENTUCKY	8.50	5.08	6.17	14.40	0.00	16.32	0.27	0.00	49.25
LOUISIANA	6.98	7.94	45.78	0.95	4.13	13.40	-	0.00	20.83
MAINE	0.00	49.66	19.55	3.37	11.01	0.00	0.00	0.00	16.40
MARYLAND	5.34	25.83	13.99	19.08	3.31	1.15	3.82	0.00	27.48
MASSACHUSETTS	8.23	66.51	18.44	1.99	2.80	0.65	0.59	0.05	0.75
MICHIGAN	35.88	5.00	50.77	5.77	2.57	0.02	0.00	0.00	0.00
MINNESOTA	12.70	39.23	6.24	37.64	-	0.00	-	0.00	4.20
MISSISSIPPI	-	-	-	-	-	-	-	-	-
MISSOURI	47.66	17.59	4.09	0.00	5.89	0.70	0.00	0.00	24.06
MONTANA	72.30	12.84	12.84	0.00	0.00	1.35	0.00	0.00	0.68
NEBRASKA	-	-	-	-	-	-	-	-	-
NEVADA	3.67	0.92	0.00	0.00	0.00	0.00	0.00	0.00	95.41
NEW HAMPSHIRE	60.79	6.83	18.71	0.00	11.15	0.00	1.08	0.00	1.44
NEW JERSEY	7.75	19.98	45.76	0.36	1.57	0.00	0.12	0.00	24.46
NEW MEXICO	6.59	90.84	2.01	0.00	0.00	0.00	0.00	0.08	0.48
NEW YORK	6.81	20.68	66.71	1.93	1.93	0.03	0.85	0.06	1.00
NORTH CAROLINA	23.31	22.72	27.60	7.14	2.11	0.00	0.00	0.00	17.12
NORTH DAKOTA	42.86	-	18.37	10.20	-	0.00	2.04	0.00	26.53
OHIO	-	-	-	-	-	-	-	-	-
OKLAHOMA	32.89	0.00	9.06	10.07	6.38	9.40	0.00	0.00	32.21
OREGON	27.72	9.76	5.54	15.74	0.22	0.33	0.22	-	40.47
PENNSYLVANIA	0.00	0.00	0.00	0.00	0.00	0.00	100.00	0.00	0.00
PUERTO RICO	17.76	15.89	7.01	0.00	0.93	0.00	0.47	0.00	57.94
RHODE ISLAND	12.82	4.49	12.18	0.00	0.00	0.00	0.64	0.00	69.87
SOUTH CAROLINA	12.38	2.48	46.04	29.70	0.50	0.50	0.00	0.00	8.42
SOUTH DAKOTA	4.65	37.21	18.60	0.00	4.65	2.33	2.33	0.00	30.23
TENNESSEE	4.48	7.43	7.43	3.44	0.43	0.00	1.10	0.00	75.69
TEXAS	2.20	79.87	9.91	4.36	0.30	0.15	0.21	0.00	3.00
UTAH	20.42	34.17	3.33	7.50	0.00	0.00	0.00	0.00	34.58
VERMONT	42.19	28.91	14.84	0.78	10.16	0.00	3.13	0.00	0.00
VIRGINIA	1.23	19.95	20.20	18.72	0.74	24.63	0.74	0.25	13.55
WASHINGTON	12.40	46.44	36.68	-	3.29	0.00	0.00	0.00	1.19
WEST VIRGINIA	39.29	3.57	41.07	8.04	0.00	0.00	1.79	0.00	6.25
WISCONSIN	31.88	35.22	32.90	0.00	0.00	0.00	0.00	0.00	0.00
WYOMING	47.69	38.97	6.15	4.62	0.00	1.54	0.00	0.00	1.03
AMERICAN SAMOA	-	-	-	-	-	-	-	-	-
GUAM	0.00	40.00	20.00	0.00	0.00	0.00	0.00	0.00	40.00
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	75.00	10.71	14.29	0.00	0.00	0.00	0.00	0.00	0.00
U.S. & INSULAR AREAS	23.47	25.44	32.69	3.97	1.94	0.72	0.56	0.02	11.18
50 STATES, D.C. & P.R.	23.45	25.45	32.70	3.97	1.94	0.72	0.56	0.02	11.18

DATA AS OF OCTOBER 1, 1986.

Table EC1

NUMBER OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

VISUALLY HANDICAPPED

NUMBER

STATE	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	264	-	43	1	-	-	-	-	-
ALASKA	22	6	12	4	0	0	0	0	0
ARIZONA	5	248	24	0	22	100	0	0	0
ARKANSAS	50	60	104	15	4	18	1	0	1
CALIFORNIA	926	167	1,115	-	10	-	-	7	-
COLORADO	178	92	4	12	0	29	0	0	4
CONNECTICUT	168	57	119	79	24	0	37	0	-
DELAWARE	5	5	20	8	8	1	0	0	7
DISTRICT OF COLUMBIA	0	2	30	0	0	0	0	0	0
FLORIDA	220	219	188	113	0	105	2	0	0
GEORGIA	59	388	18	13	0	101	0	0	0
HAWAII	45	11	30	5	0	0	0	0	0
IDAHO	19	32	11	2	0	70	0	0	0
ILLINOIS	172	278	630	59	19	91	16	1	1
INDIANA	76	260	24	17	0	181	0	0	0
IOWA	92	36	44	-	0	59	-	-	8
KANSAS	90	93	9	0	7	53	0	0	4
KENTUCKY	267	217	21	43	0	10	0	1	10
LOUISIANA	113	61	223	12	0	109	-	0	0
MAINE	64	98	12	0	3	0	1	0	1
MARYLAND	52	243	63	146	1	232	0	0	11
MASSACHUSETTS	66	529	146	15	22	6	4	0	6
MICHIGAN	457	165	266	1	7	12	0	0	0
MINNESOTA	182	153	24	63	-	24	-	0	6
MISSISSIPPI	0	70	31	13	1	107	0	1	1
MISSOURI	230	158	70	0	48	154	0	0	0
MONTANA	86	41	2	0	0	8	0	0	5
NEBRASKA	23	98	11	0	0	40	0	3	0
NEVADA	6	10	41	0	0	0	0	0	0
NEW HAMPSHIRE	84	21	35	0	31	0	7	0	3
NEW JERSEY	1,086	101	42	11	19	0	2	0	0
NEW MEXICO	41	17	20	0	0	73	0	0	0
NEW YORK	438	648	438	60	173	68	45	7	0
NORTH CAROLINA	297	165	46	10	1	144	1	0	0
NORTH DAKOTA	33	-	5	20	-	0	0	0	3
OHIO	357	146	303	29	3	122	0	0	6
OKLAHOMA	135	0	48	19	3	112	0	0	8
OREGON	662	227	42	15	53	57	54	-	12
PENNSYLVANIA	1,009	278	211	24	419	5	102	38	2
PUERTO RICO	85	114	117	8	4	45	7	0	42
RHODE ISLAND	30	8	17	0	4	0	8	0	1
SOUTH CAROLINA	271	113	36	0	2	69	0	0	0
SOUTH DAKOTA	10	23	1	4	0	16	1	0	0
TENNESSEE	310	215	41	32	4	108	2	0	4
TEXAS	44	1,631	202	90	6	127	3	1	61
UTAH	55	158	2	163	0	1	0	0	0
VERMONT	27	8	7	0	1	0	1	0	2
VIRGINIA	8	448	48	18	3	80	0	0	0
WASHINGTON	60	150	267	-	22	73	0	0	2
WEST VIRGINIA	165	27	9	2	0	89	0	0	0
WISCONSIN	88	101	69	25	2	87	0	0	0
WYOMING	22	10	3	0	0	2	2	0	0
AMERICAN SAMOA	0	0	0	1	0	0	0	0	0
GUAM	6	0	8	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	6	6	0	0	0	1	0	0	0
U.S. & INSULAR AREAS	9,266	8,412	5,352	1,152	926	2,789	296	59	211
50 STATES, D.C. & P.R.	9,254	8,406	5,344	1,151	926	2,788	296	59	211

DATA AS OF OCTOBER 1, 1986.

Table EC1

PERCENT OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

	VISUALLY HANDICAPPED PERCENT								
STATE	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	85.71	-	13.96	0.32	-	-	-	-	-
ALASKA	50.00	13.64	27.27	9.09	0.00	0.00	0.00	0.00	0.00
ARIZONA	1.25	62.16	6.02	0.00	5.51	25.06	0.00	0.00	0.00
ARKANSAS	19.76	23.72	41.11	5.93	1.58	7.11	0.40	0.00	0.40
CALIFORNIA	41.62	7.51	50.11	-	0.45	-	-	0.31	-
COLORADO	55.80	28.84	1.25	3.76	0.00	9.09	0.00	0.00	1.25
CONNECTICUT	34.71	11.78	24.59	16.32	4.96	0.00	7.64	0.00	-
DELAWARE	9.26	9.26	37.04	14.81	14.81	1.85	0.00	0.00	12.96
DISTRICT OF COLUMBIA	0.00	6.25	93.75	0.00	0.00	0.00	0.00	0.00	0.00
FLORIDA	25.97	25.86	22.20	13.34	0.00	12.40	0.24	0.00	0.00
GEORGIA	10.19	67.01	3.11	2.25	0.00	17.44	0.00	0.00	0.00
HAWAII	49.45	12.09	32.97	5.49	0.00	0.00	0.00	0.00	0.00
IDAHO	14.18	23.88	8.21	1.49	0.00	52.24	0.00	0.00	0.00
ILLINOIS	13.58	21.94	49.72	4.66	1.50	7.18	1.26	0.08	0.08
INDIANA	13.62	46.59	4.30	3.05	0.00	32.44	0.00	0.00	0.00
IOWA	38.49	15.06	18.41	-	0.00	24.69	-	-	3.35
KANSAS	35.16	36.33	3.52	0.00	2.73	20.70	0.00	0.00	1.56
KENTUCKY	46.92	38.14	3.69	7.56	0.00	1.76	0.00	0.18	1.76
LOUISIANA	21.81	11.78	43.05	2.32	0.00	21.04	-	0.00	0.00
MAINE	35.75	54.75	6.70	0.00	1.68	0.00	0.56	0.00	0.56
MARYLAND	6.95	32.49	8.42	19.52	0.13	31.02	0.00	0.00	1.47
MASSACHUSETTS	8.31	66.62	18.39	1.89	2.77	0.76	0.50	0.00	0.76
MICHIGAN	50.33	18.17	29.30	0.11	0.77	1.32	0.00	0.00	0.00
MINNESOTA	40.27	33.85	5.31	13.94	-	5.31	-	0.00	1.33
MISSISSIPPI	0.00	31.25	13.84	5.80	0.45	47.77	0.00	0.45	0.45
MISSOURI	34.85	23.94	10.61	0.00	7.27	23.33	0.00	0.00	0.00
MONTANA	60.56	28.87	1.41	0.00	0.00	5.63	0.00	0.00	3.52
NEBRASKA	13.14	56.00	6.29	0.00	0.00	22.86	0.00	1.71	0.00
NEVADA	10.53	17.54	71.93	0.00	0.00	0.00	0.00	0.00	0.00
NEW HAMPSHIRE	46.41	11.60	19.34	0.00	17.13	0.00	3.87	0.00	1.66
NEW JERSEY	86.12	8.01	3.33	0.87	1.51	0.00	0.16	0.00	0.00
NEW MEXICO	27.15	11.26	13.25	0.00	0.00	48.34	0.00	0.00	0.00
NEW YORK	23.34	34.52	23.34	3.20	9.22	3.62	2.40	0.37	0.00
NORTH CAROLINA	44.73	24.85	6.93	1.51	0.15	21.69	0.15	0.00	0.00
NORTH DAKOTA	54.10	-	8.20	32.79	-	0.00	0.00	0.00	4.92
OHIO	36.96	15.11	31.37	3.00	0.31	12.63	0.00	0.00	0.62
OKLAHOMA	41.54	0.00	14.77	5.85	0.92	34.46	0.00	0.00	2.46
OREGON	59.00	20.23	3.74	1.34	4.72	5.08	4.81	-	1.07
PENNSYLVANIA	48.32	13.31	10.11	1.15	20.07	0.24	4.89	1.82	0.10
PUERTO RICO	20.14	27.01	27.73	1.90	0.95	10.66	1.66	0.00	9.95
RHODE ISLAND	44.12	11.76	25.00	0.00	5.88	0.00	11.76	0.00	1.47
SOUTH CAROLINA	55.19	23.01	7.33	0.00	0.41	14.05	0.00	0.00	0.00
SOUTH DAKOTA	18.18	41.82	1.82	7.27	0.00	29.09	1.82	0.00	0.00
TENNESSEE	43.30	30.03	5.73	4.47	0.56	15.08	0.28	0.00	0.56
TEXAS	2.03	75.33	9.33	4.16	0.28	5.87	0.14	0.05	2.82
UTAH	14.51	41.69	0.53	43.01	0.00	0.26	0.00	0.00	0.00
VERMONT	58.70	17.39	15.22	0.00	2.17	0.00	2.17	0.00	4.35
VIRGINIA	1.32	74.05	7.93	2.98	0.50	13.22	0.00	0.00	0.00
WASHINGTON	10.45	26.13	46.52	-	3.83	12.72	0.00	0.00	0.35
WEST VIRGINIA	56.51	9.25	3.08	0.68	0.00	30.48	0.00	0.00	0.00
WISCONSIN	23.66	27.15	18.55	6.72	0.54	23.39	0.00	0.00	0.00
WYOMING	56.41	25.64	7.69	0.00	0.00	5.13	5.13	0.00	0.00
AMERICAN SAMOA	0.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00
GUAM	42.86	0.00	57.14	0.00	0.00	0.00	0.00	0.00	0.00
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	46.15	46.15	0.00	0.00	0.00	7.69	0.00	0.00	0.00
U.S. & INSULAR AREAS	32.55	29.55	18.80	4.05	3.25	9.80	1.04	0.21	0.74
50 STATES, D.C. & P.R.	32.54	29.56	18.79	4.05	3.26	9.80	1.04	0.21	0.74

DATA AS OF OCTOBER 1, 1986.

Table EC1

NUMBER OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

DEAF-BLIND
NUMBER

STATE	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	7	-	17	0	-	-	-	-	-
ALASKA	0	0	23	0	0	0	0	0	0
ARIZONA	0	0	0	0	0	0	0	0	0
ARKANSAS	0	107	7	3	28	1	1	0	4
CALIFORNIA	20	2	136	-	0	-	-	0	-
COLORADO	1	2	10	20	0	44	0	0	3
CONNECTICUT	2	1	1	1	0	0	6	0	-
DELAWARE	0	2	6	27	0	0	0	0	0
DISTRICT OF COLUMBIA	0	0	0	24	1	9	1	0	0
FLORIDA	0	0	7	53	0	0	0	0	0
GEORGIA	0	5	3	2	0	16	0	0	0
HAWAII	0	0	10	5	0	0	0	0	0
IDAHO	0	0	0	0	0	0	0	0	0
ILLINOIS	1	1	24	27	2	36	2	0	0
INDIANA	0	0	0	6	0	0	0	0	0
IOWA	0	0	27	-	0	37	-	-	0
KANSAS	0	1	14	0	9	40	0	0	4
KENTUCKY	1	6	2	3	0	1	0	0	4
LOUISIANA	0	0	12	12	0	10	-	0	0
MAINE	0	0	5	0	0	0	0	0	0
MARYLAND	1	0	2	9	0	89	0	0	2
MASSACHUSETTS	11	89	25	1	4	2	0	0	1
MICHIGAN	0	0	0	0	0	0	0	0	0
MINNESOTA	1	11	9	17	-	10	-	0	5
MISSISSIPPI	0	1	0	0	0	0	0	0	1
MISSOURI	0	5	82	0	6	13	0	0	1
MONTANA	9	2	5	5	0	11	0	0	4
NEBRASKA	-	-	-	-	-	-	0	0	-
NEVADA	0	0	0	0	0	0	0	0	0
NEW HAMPSHIRE	0	2	2	1	1	0	5	0	0
NEW JERSEY	0	0	3	4	4	86	0	0	0
NEW MEXICO	0	2	4	0	0	27	0	0	0
NEW YORK	15	9	17	10	26	0	58	0	1
NORTH CAROLINA	0	0	3	4	3	19	0	0	0
NORTH DAKOTA	1	-	1	27	-	0	0	0	0
OHIO	1	0	5	11	0	0	0	0	1
OKLAHOMA	0	3	24	0	10	7	0	0	4
OREGON	14	6	5	1	0	0	0	-	0
PENNSYLVANIA	0	1	1	10	5	0	20	0	0
PUERTO RICO	0	0	4	72	2	17	3	0	9
RHODE ISLAND	1	0	1	0	7	0	3	0	0
SOUTH CAROLINA	0	0	5	2	0	2	0	0	0
SOUTH DAKOTA	0	2	0	0	1	10	0	0	0
TENNESSEE	3	5	3	5	0	56	2	0	2
TEXAS	1	45	6	26	2	38	0	0	1
UTAH	0	0	1	42	0	0	1	0	0
VERMONT	0	1	2	0	0	0	0	0	0
VIRGINIA	0	12	2	10	0	18	0	1	0
WASHINGTON	0	0	0	-	3	20	0	0	0
WEST VIRGINIA	2	4	0	0	0	9	0	0	0
WISCONSIN	0	0	14	0	0	11	0	0	0
WYOMING	10	24	1	0	0	1	0	0	0
AMERICAN SAMOA	0	0	0	4	0	0	0	0	0
GUAM	0	0	0	5	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	0	0	0	0	0	0	0	0
U.S. & INSULAR AREAS	102	351	531	449	114	640	102	1	47
50 STATES, D.C. & P.R.	102	351	531	440	114	640	102	1	47

DATA AS OF OCTOBER 1, 1986.

Table EC1

PERCENT OF CHILDREN 3 - 21 YEARS OLD SERVED IN DIFFERENT EDUCATIONAL ENVIRONMENTS DURING SCHOOL YEAR 1984-1985

DEAF-BLIND
PERCENT

STATE	REGULAR CLASS	RESOURCE ROOM	SEPARATE CLASS	PUBLIC SEPARATE SCHOOL FACILITY	PRIVATE SEPARATE SCHOOL FACILITY	PUBLIC RESIDENTIAL FACILITY	PRIVATE RESIDENTIAL FACILITY	CORRECTION FACILITY	HOMEBOUND/ HOSPITAL ENVIRONMENT
ALABAMA	29.17	–	70.83	0.00	–	–	–	–	–
ALASKA	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00	0.00
ARIZONA	–	–	–	–	–	–	–	–	–
ARKANSAS	0.00	70.86	4.64	1.99	18.54	0.66	0.66	0.00	2.65
CALIFORNIA	12.66	1.27	86.08	–	0.00	–	–	0.00	–
COLORADO	1.25	2.50	12.50	25.00	0.00	55.00	0.00	0.00	3.75
CONNECTICUT	18.18	9.09	9.09	9.09	0.00	0.00	54.55	0.00	–
DELAWARE	0.00	5.71	17.14	77.14	0.00	0.00	0.00	0.00	0.00
DISTRICT OF COLUMBIA	0.00	0.00	0.00	68.57	2.86	25.71	2.86	0.00	0.00
FLORIDA	0.00	0.00	11.67	88.33	0.00	0.00	0.00	0.00	0.00
GEORGIA	0.00	19.23	11.54	7.69	0.00	61.54	0.00	0.00	0.00
HAWAII	0.00	0.00	66.67	33.33	0.00	0.00	0.00	0.00	0.00
IDAHO	–	–	–	–	–	–	–	–	–
ILLINOIS	1.08	1.08	25.81	29.03	2.15	38.71	2.15	0.00	0.00
INDIANA	0.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00
IOWA	0.00	0.00	42.19	–	0.00	57.81	–	–	0.00
KANSAS	0.00	1.47	20.59	0.00	13.24	58.82	0.00	0.00	5.88
KENTUCKY	5.88	35.29	11.76	17.65	0.00	5.88	0.00	0.00	23.53
LOUISIANA	0.00	0.00	35.29	35.29	0.00	29.41	–	0.00	0.00
MAINE	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00	0.00
MARYLAND	0.97	0.00	1.94	8.74	0.00	86.41	0.00	0.00	1.94
MASSACHUSETTS	8.27	66.92	18.80	0.75	3.01	1.50	0.00	0.00	0.75
MICHIGAN	–	–	–	–	–	–	–	–	–
MINNESOTA	1.89	20.75	16.98	32.08	–	18.87	–	0.00	9.43
MISSISSIPPI	0.00	50.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00
MISSOURI	0.00	4.67	76.64	0.00	5.61	12.15	0.00	0.00	0.93
MONTANA	25.00	5.56	13.89	13.89	0.00	30.56	0.00	0.00	11.11
NEBRASKA	–	–	–	–	–	–	–	–	–
NEVADA	–	–	–	–	–	–	–	–	–
NEW HAMPSHIRE	0.00	18.18	18.18	9.09	9.09	0.00	45.45	0.00	0.00
NEW JERSEY	0.00	0.00	3.09	4.12	4.12	88.66	0.00	0.00	0.00
NEW MEXICO	0.00	6.06	12.12	0.00	0.00	81.82	0.00	0.00	0.00
NEW YORK	11.03	6.62	12.50	7.35	19.12	0.00	42.65	0.00	0.74
NORTH CAROLINA	0.00	0.00	10.34	13.79	10.34	65.52	0.00	0.00	0.00
NORTH DAKOTA	3.45	–	3.45	93.10	–	0.00	0.00	0.00	0.00
OHIO	5.56	0.00	27.78	61.11	0.00	0.00	0.00	0.00	5.56
OKLAHOMA	0.00	6.25	50.00	0.00	20.83	14.58	0.00	0.00	8.33
OREGON	53.85	23.08	19.23	3.85	0.00	0.00	0.00	–	0.00
PENNSYLVANIA	0.00	2.70	2.70	27.03	13.51	0.00	54.05	0.00	0.00
PUERTO RICO	0.00	0.00	3.74	67.29	1.87	15.89	2.80	0.00	8.41
RHODE ISLAND	8.33	0.00	8.33	0.00	58.33	0.00	25.00	0.00	0.00
SOUTH CAROLINA	0.00	0.00	55.56	22.22	0.00	22.22	0.00	0.00	0.00
SOUTH DAKOTA	0.00	15.38	0.00	0.00	7.69	76.92	0.00	0.00	0.00
TENNESSEE	4.05	6.76	4.05	6.76	0.00	75.68	0.00	0.00	2.70
TEXAS	0.83	37.19	4.96	21.49	1.65	31.40	1.65	0.00	0.83
UTAH	0.00	0.00	2.33	97.67	0.00	0.00	0.00	0.00	0.00
VERMONT	0.00	25.00	50.00	0.00	0.00	0.00	25.00	0.00	0.00
VIRGINIA	0.00	27.91	4.65	23.26	0.00	41.86	0.00	2.33	0.00
WASHINGTON	0.00	0.00	0.00	–	13.04	86.96	0.00	0.00	0.00
WEST VIRGINIA	13.33	26.67	0.00	0.00	0.00	60.00	0.00	0.00	0.00
WISCONSIN	0.00	0.00	56.00	0.00	0.00	44.00	0.00	0.00	0.00
WYOMING	27.78	66.67	2.78	0.00	0.00	2.78	0.00	0.00	0.00
AMERICAN SAMOA	0.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00
GUAM	0.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00
NORTHERN MARIANAS	–	–	–	–	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	–	–	–	–	–	–	–	–	–
U.S. & INSULAR AREAS	4.36	15.02	22.72	19.21	4.88	27.39	4.36	0.04	2.01
50 STATES, D.C. & P.R.	4.38	15.08	22.81	18.90	4.90	27.49	4.38	0.04	2.02

DATA AS OF OCTOBER 1, 1986.

Table ED1

NUMBER OF SPECIAL EDUCATION TEACHERS EMPLOYED AND NEEDED FOR SCHOOL YEAR 1984-1985

BY HANDICAPPING CONDITION

STATE	ALL CONDITIONS		LEARNING DISABLED		SPEECH IMPAIRED		MENTALLY RETARDED		EMOTIONALLY DISTURBED	
	EMPLOYED	NEEDED	EMPLOYED	NEEDED	EMPLOYED	NEEDED	EMPLOYED	NEEDED	EMPLOYED	NEEDED
ALABAMA	4,539	451	1,137	171	425	3	2,262	169	323	77
ALASKA	789	134	426	76	168	27	81	14	39	4
ARIZONA	3,363	280	1,598	141	388	30	550	39	363	28
ARKANSAS	2,692	277	1,117	111	419	46	949	89	48	9
CALIFORNIA	18,092	0	10,940	0	426	0	3,106	0	962	0
COLORADO	3,405	3	1,289	2	301	1	659	0	652	0
CONNECTICUT	3,884	201	1,765	74	565	41	935	18	485	43
DELAWARE	1,165	86	552	36	72	2	183	16	264	24
DISTRICT OF COLUMBIA	665	42	235	8	118	6	118	6	94	8
FLORIDA	9,720	966	3,038	274	1,396	81	2,238	228	2,034	321
GEORGIA	6,517	1,495	1,715	344	763	176	2,044	383	1,388	488
HAWAII	809	12	429	3	128	6	116	2	43	0
IDAHO	1,021	222	561	0	121	0	236	0	37	0
ILLINOIS	18,438	187	5,177	32	1,976	31	3,348	23	2,360	40
INDIANA	6,247	659	2,094	177	769	80	2,244	248	609	77
IOWA	5,148	451	2,046	231	594	12	1,262	79	625	76
KANSAS	3,033	56	830	16	418	4	539	0	413	22
KENTUCKY	3,480	454	1,093	177	463	43	1,107	162	251	27
LOUISIANA	6,907	1,816	2,931	964	1,091	69	1,357	407	692	266
MAINE	2,952	53	849	20	222	0	745	8	410	20
MARYLAND	5,868	266	2,551	108	984	38	935	62	514	25
MASSACHUSETTS	6,387	427	2,255	151	1,469	98	1,354	90	875	59
MICHIGAN	10,902	1,515	3,082	402	1,325	178	3,181	516	2,072	212
MINNESOTA	6,124	106	2,759	35	902	1	1,562	11	586	40
MISSISSIPPI	2,906	152	1,307	54	431	37	1,057	46	25	2
MISSOURI	5,420	606	2,294	252	938	149	1,347	121	641	53
MONTANA	942	4	-	0	-	0	-	0	-	0
NEBRASKA	1,717	5	640	0	325	5	554	0	109	0
NEVADA	877	116	515	59	111	15	112	23	60	5
NEW HAMPSHIRE	1,102	70	479	15	192	33	197	8	139	7
NEW JERSEY	11,443	406	4,733	168	1,817	58	1,847	72	1,730	62
NEW MEXICO	1,807	359	654	141	492	112	193	36	257	35
NEW YORK	27,244	4,383	7,238	1,252	2,368	318	2,799	384	5,047	989
NORTH CAROLINA	5,898	477	1,962	116	670	75	2,046	130	547	102
NORTH DAKOTA	876	77	273	38	208	16	256	4	41	10
OHIO	13,171	504	4,771	133	1,122	53	4,929	110	963	131
OKLAHOMA	3,249	239	1,424	93	378	33	1,022	67	153	23
OREGON	1,986	109	586	36	503	24	393	30	98	8
PENNSYLVANIA	11,328	600	3,871	224	1,420	68	3,224	147	1,570	107
PUERTO RICO	1,932	0	168	0	37	0	1,208	0	109	0
RHODE ISLAND	1,102	22	689	10	133	3	112	1	73	5
SOUTH CAROLINA	4,033	955	1,153	361	507	104	1,629	294	364	113
SOUTH DAKOTA	632	182	-	0	-	0	-	0	-	0
TENNESSEE	4,615	125	2,084	75	775	10	1,025	26	169	3
TEXAS	17,862	367	8,368	29	5,516	42	1,554	50	1,144	157
UTAH	2,004	141	616	42	214	16	285	24	444	38
VERMONT	484	30	171	0	2	28	221	2	35	0
VIRGINIA	5,925	155	2,840	51	759	19	1,165	7	598	46
WASHINGTON	3,747	470	1,660	205	415	67	946	109	182	61
WEST VIRGINIA	2,880	1,290	1,019	548	405	143	957	340	259	201
WISCONSIN	6,228	654	1,947	278	1,234	79	1,456	18	1,061	272
WYOMING	766	62	406	31	124	10	101	6	65	9
AMERICAN SAMOA	29	4	5	1	2	0	15	2	0	0
GUAM	164	33	52	10	12	0	71	20	4	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	97	-	26	-	20	-	23	-	18
U.S. & INSULAR AREAS	274,519	22,852	102,395	7,800	36,612	2,511	61,832	4,671	32,027	4,322
50 STATES, D.C. & P.R.	274,326	22,718	102,338	7,763	36,598	2,491	61,746	4,626	32,023	4,304

THE TOTAL FTE FOR THE U.S. & INSULAR AREAS AND THE 50 STATES, D.C., AND PUERTO RICO MAY NOT EQUAL THE SUM OF THE U.S. & INSULAR AREAS BECAUSE OF ROUNDING.

THE TOTALS MAY NOT SUM BECAUSE SOME STATES ONLY REPORTED TOTALS FOR TEACHERS INSTEAD OF REPORTING BY INDIVIDUAL CATEGORIES.

DATA AS OF OCTOBER 1, 1986.

Table ED1

NUMBER OF SPECIAL EDUCATION TEACHERS EMPLOYED AND NEEDED FOR SCHOOL YEAR 1984-1985

BY HANDICAPPING CONDITION

STATE	HARD OF HEARING & DEAF		MULTIHANDICAPPED		ORTHOPEDICALLY IMPAIRED		OTHER HEALTH IMPAIRED		VISUALLY HANDICAPPED	
	EMPLOYED	NEEDED	EMPLOYED	NEEDED	EMPLOYED	NEEDED	EMPLOYED	NEEDED	EMPLOYED	NEEDED
ALABAMA	85	4	122	8	36	5	31	10	37	3
ALASKA	26	4	29	5	10	1	4	1	6	2
ARIZONA	150	18	149	9	25	1	80	6	60	8
ARKANSAS	77	4	40	11	5	0	6	1	30	5
CALIFORNIA	458	0	776	0	468	0	236	0	145	0
COLORADO	150	0	247	0	64	0	0	0	37	0
CONNECTICUT	58	2	1	4	40	1	15	0	20	1
DELAWARE	31	2	8	2	33	1	2	1	11	1
DISTRICT OF COLUMBIA	13	0	35	8	9	0	23	4	13	2
FLORIDA	319	12	–	0	190	17	342	18	153	14
GEORGIA	258	38	0	0	85	32	155	9	107	24
HAWAII	25	0	23	1	32	0	–	0	10	0
IDAHO	43	222	4	0	0	0	8	0	12	0
ILLINOIS	730	3	179	5	333	0	–	0	262	0
INDIANA	187	13	169	22	78	7	4	21	88	14
IOWA	157	7	136	40	266	0	0	0	51	0
KANSAS	98	2	659	8	14	0	21	2	40	4
KENTUCKY	359	16	100	16	20	4	43	4	45	5
LOUISIANA	291	16	117	15	85	35	233	25	101	19
MAINE	61	5	310	0	140	0	200	0	10	0
MARYLAND	182	2	462	20	68	3	56	1	106	7
MASSACHUSETTS	89	6	140	9	70	5	89	6	38	3
MICHIGAN	428	87	246	2	–	0	395	49	132	42
MINNESOTA	177	3	0	0	52	2	28	12	55	2
MISSISSIPPI	33	2	9	0	7	4	0	0	4	7
MISSOURI	–	19	1	0	70	6	0	0	23	4
MONTANA	–	0	–	0	–	0	–	0	–	0
NEBRASKA	66	0	–	0	–	0	–	0	23	0
NEVADA	22	3	36	3	7	1	8	4	7	0
NEW HAMPSHIRE	16	0	44	2	5	0	9	1	15	3
NEW JERSEY	204	8	787	31	90	2	184	4	33	0
NEW MEXICO	55	4	59	10	15	5	63	16	18	0
NEW YORK	970	130	1,278	181	233	31	6,954	1,050	357	48
NORTH CAROLINA	–	7	174	25	59	3	122	15	52	4
NORTH DAKOTA	32	4	–	0	34	2	13	0	15	2
OHIO	323	11	524	54	444	6	0	0	95	6
OKLAHOMA	76	3	135	17	27	0	10	0	14	2
OREGON	97	6	26	1	137	3	110	0	30	1
PENNSYLVANIA	532	25	323	13	187	3	0	0	188	14
PUERTO RICO	88	0	248	0	11	0	12	0	35	0
RHODE ISLAND	26	3	13	0	2	0	46	1	7	0
SOUTH CAROLINA	128	25	46	7	67	22	62	8	76	18
SOUTH DAKOTA	–	0	–	0	–	0	–	0	–	0
TENNESSEE	97	2	143	2	83	2	164	4	45	1
TEXAS	213	24	204	16	220	15	462	11	106	10
UTAH	113	1	167	9	38	6	9	1	77	1
VERMONT	20	0	19	0	7	0	7	0	1	0
VIRGINIA	193	0	210	32	52	0	29	0	75	0
WASHINGTON	115	7	191	16	36	1	172	3	16	0
WEST VIRGINIA	92	19	3	0	46	11	31	11	58	16
WISCONSIN	–	1	–	0	226	3	–	0	49	3
WYOMING	21	2	25	0	12	3	5	0	7	1
AMERICAN SAMOA	1	1	4	0	0	0	0	0	0	0
GUAM	6	0	14	3	1	0	2	0	1	0
NORTHERN MARIANAS	–	–	–	–	–	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	–	0	–	10	–	0	–	0	–	0
U.S. & INSULAR AREAS	7,992	773	8,637	618	4,240	243	10,445	1,299	2,995	296
50 STATES, D.C. & P.R.	7,985	772	8,619	605	4,239	243	10,443	1,299	2,994	296

THE TOTAL FTE FOR THE U.S. & INSULAR AREAS AND THE 50 STATES, D.C., AND PUERTO RICO MAY NOT EQUAL THE SUM OF THE U.S. & INSULAR AREAS BECAUSE OF ROUNDING.

THE TOTALS MAY NOT SUM BECAUSE SOME STATES ONLY REPORTED TOTALS FOR TEACHERS INSTEAD OF REPORTING BY INDIVIDUAL CATEGORIES.

DATA AS OF OCTOBER 1, 1986.

Table ED1

NUMBER OF SPECIAL EDUCATION TEACHERS EMPLOYED AND NEEDED FOR SCHOOL YEAR 1984-1985

BY HANDICAPPING CONDITION

STATE	DEAF-BLIND	
	EMPLOYED	NEEDED
ALABAMA	3	2
ALASKA	2	0
ARIZONA	1	0
ARKANSAS	1	0
CALIFORNIA	33	0
COLORADO	5	0
CONNECTICUT	0	1
DELAWARE	9	1
DISTRICT OF COLUMBIA	8	0
FLORIDA	9	0
GEORGIA	1	0
HAWAII	1	0
IDAHO	0	0
ILLINOIS	-	0
INDIANA	5	0
IOWA	11	6
KANSAS	-	0
KENTUCKY	0	0
LOUISIANA	9	0
MAINE	5	0
MARYLAND	9	0
MASSACHUSETTS	6	0
MICHIGAN	0	0
MINNESOTA	3	0
MISSISSIPPI	0	0
MISSOURI	15	2
MONTANA	-	0
NEBRASKA	-	0
NEVADA	0	3
NEW HAMPSHIRE	5	0
NEW JERSEY	18	1
NEW MEXICO	1	1
NEW YORK	0	0
NORTH CAROLINA	4	0
NORTH DAKOTA	5	1
OHIO	0	0
OKLAHOMA	10	1
OREGON	5	0
PENNSYLVANIA	15	0
PUERTO RICO	16	0
RHODE ISLAND	0	0
SOUTH CAROLINA	1	2
SOUTH DAKOTA	-	0
TENNESSEE	30	0
TEXAS	75	13
UTAH	41	3
VERMONT	1	0
VIRGINIA	4	0
WASHINGTON	13	0
WEST VIRGINIA	10	1
WISCONSIN	4	0
WYOMING	0	0
AMERICAN SAMOA	2	0
GUAM	1	0
NORTHERN MARIANAS	-	-
TRUST TERRITORIES	-	-
VIRGIN ISLANDS	-	-
BUR. OF INDIAN AFFAIRS	-	0
U.S. & INSULAR AREAS	396	38
50 STATES, D.C. & P.R.	393	38

THE TOTAL FTE FOR THE U.S. & INSULAR AREAS AND THE 50 STATES, D.C., AND PUERTO RICO MAY NOT EQUAL THE SUM OF THE U.S. & INSULAR AREAS BECAUSE OF ROUNDING.

THE TOTALS MAY NOT SUM BECAUSE SOME STATES ONLY REPORTED TOTALS FOR TEACHERS INSTEAD OF REPORTING BY INDIVIDUAL CATEGORIES.

DATA AS OF OCTOBER 1, 1986.

Table ED2

SCHOOL STAFF OTHER THAN SPECIAL EDUCATION TEACHERS EMPLOYED AND NEEDED TO SERVE HANDICAPPED CHILDREN FOR SCHOOL YEAR 1984-85

	ALL STAFF		SCHOOL SOCIAL WORKERS		OCCUPATIONAL THERAPISTS		RECREATIONAL THERAPISTS		PHYSICAL THERAPISTS	
STATE	EMPLOYED	NEEDED	EMPLOYED	NEEDED	EMPLOYED	NEEDED	EMPLOYED	NEEDED	EMPLOYED	NEEDED
ALABAMA	2,066	18	20	0	19	0	2	0	7	3
ALASKA	896	62	3	0	20	2	2	0	27	2
ARIZONA	2,599	289	77	4	31	6	1	0	13	5
ARKANSAS	649	67	3	0	4	2	2	0	6	1
CALIFORNIA	27,851	0	223	0	31	0	0	0	31	0
COLORADO	2,940	9	286	0	116	4	10	0	46	5
CONNECTICUT	1,842	224	325	28	29	3	4	0	27	4
DELAWARE	790	54	11	0	15	11	2	0	9	6
DISTRICT OF COLUMBIA	684	33	46	2	12	1	7	0	7	0
FLORIDA	9,096	251	207	6	127	5	9	–	79	4
GEORGIA	4,199	493	220	12	44	7	26	6	52	15
HAWAII	887	15	44	0	21	6	0	0	17	0
IDAHO	806	0	36	0	10	0	6	0	1	0
ILLINOIS	14,232	92	1,157	18	212	13	17	–	157	20
INDIANA	5,706	552	128	17	73	16	55	2	80	20
IOWA	3,192	33	220	0	56	2	13	0	43	4
KANSAS	3,150	29	99	1	38	2	–	0	24	2
KENTUCKY	2,695	244	40	3	28	4	19	0	40	4
LOUISIANA	9,046	30	210	0	72	0	6	0	36	0
MAINE	2,667	178	108	10	14	10	3	0	17	10
MARYLAND	4,804	202	94	7	110	11	16	1	85	16
MASSACHUSETTS	5,859	389	460	11	49	5	0	0	29	2
MICHIGAN	7,840	918	829	169	251	27	0	8	154	13
MINNESOTA	4,944	2	345	0	141	0	4	0	49	0
MISSISSIPPI	1,216	133	31	5	2	2	0	0	12	4
MISSOURI	2,713	41	60	0	40	4	0	0	27	3
MONTANA	624	12	5	2	4	3	2	0	6	2
NEBRASKA	1,034	0	13	0	14	0	0	0	25	0
NEVADA	580	49	2	0	6	2	1	0	7	2
NEW HAMPSHIRE	1,762	131	33	0	69	6	14	0	26	4
NEW JERSEY	13,088	393	983	34	104	11	19	2	112	13
NEW MEXICO	2,549	17	47	–	84	0	3	–	55	1
NEW YORK	14,749	0	–	–	–	–	–	–	–	–
NORTH CAROLINA	4,361	376	73	14	76	15	28	5	64	8
NORTH DAKOTA	620	8	41	1	32	2	3	0	27	1
OHIO	5,995	312	50	0	157	17	24	0	121	13
OKLAHOMA	1,976	112	46	2	19	1	2	9	30	5
OREGON	3,816	180	21	7	24	1	5	0	24	4
PENNSYLVANIA	10,197	361	158	2	124	4	145	0	137	15
PUERTO RICO	1,339	9	70	0	8	1	1	0	0	0
RHODE ISLAND	1,246	10	69	2	11	3	0	0	14	0
SOUTH CAROLINA	3,047	415	64	19	18	7	97	3	21	10
SOUTH DAKOTA	724	106	8	5	6	2	0	0	10	5
TENNESSEE	3,819	3	75	0	25	0	15	0	60	0
TEXAS	12,860	189	168	0	128	15	45	4	42	10
UTAH	1,068	116	69	3	12	4	1	0	13	4
VERMONT	767	3	11	0	5	0	2	0	3	0
VIRGINIA	5,233	0	304	0	89	0	3	0	78	0
WASHINGTON	3,436	574	30	0	107	45	0	0	79	28
WEST VIRGINIA	1,741	185	6	1	10	3	0	0	24	8
WISCONSIN	4,253	22	340	3	159	3	–	0	170	1
WYOMING	785	65	45	3	24	3	0	0	2	1
AMERICAN SAMOA	24	0	1	–	0	–	0	–	0	–
GUAM	185	0	3	0	4	0	2	0	4	0
NORTHERN MARIANAS	–	–	–	–	–	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	779	139	10	7	3	4	1	2	4	7
U.S. & INSULAR AREAS	226,021	8,144	8,027	397	2,886	293	616	42	2,234	284
50 STATES, D.C. & P.R.	225,033	8,005	8,013	390	2,879	289	613	40	2,226	277

THE TOTAL FTE FOR THE U.S. & INSULAR AREAS AND THE 50 STATES, D.C., & PUERTO RICO MAY NOT EQUAL THE SUM OF THE STATES AND INSULAR AREAS BECAUSE OF ROUNDING.

THE TOTALS MAY NOT SUM BECAUSE SOME STATES ONLY REPORTED TOTALS FOR ALL STAFF INSTEAD OF REPORTING BY INDIVIDUAL CATEGORIES.

DATA AS OF OCTOBER 1, 1986.

Table ED2

SCHOOL STAFF OTHER THAN SPECIAL EDUCATION TEACHERS EMPLOYED AND NEEDED TO SERVE HANDICAPPED CHILDREN FOR SCHOOL YEAR 1984-85

STATE	TEACHER AIDES		PHYSICAL EDUCATION TEACHERS		SUPERVISORS/ ADMINISTRATORS		OTHER NON-INSTRUCTIONAL STAFF		PSYCHOLOGISTS	
	EMPLOYED	NEEDED	EMPLOYED	NEEDED	EMPLOYED	NEEDED	EMPLOYED	NEEDED	EMPLOYED	NEEDED
ALABAMA	958	4	76	0	140	4	438	1	180	0
ALASKA	461	39	4	2	32	2	219	6	48	5
ARIZONA	1,296	224	50	2	116	12	503	11	211	16
ARKANSAS	284	35	2	0	84	2	175	20	5	1
CALIFORNIA	17,954	0	411	0	425	0	2,103	0	2,116	0
COLORADO	1,456	0	9	0	174	1	437	0	304	0
CONNECTICUT	295	118	32	0	125	24	356	13	397	24
DELAWARE	388	22	15	0	41	0	112	3	70	3
DISTRICT OF COLUMBIA	131	12	18	2	68	1	284	6	68	3
FLORIDA	4,218	147	125	4	615	22	1,770	25	445	7
GEORGIA	1,949	358	44	9	366	8	648	32	347	17
HAWAII	320	0	7	0	13	0	270	0	7	2
IDAHO	517	0	2	0	62	0	48	0	107	0
ILLINOIS	6,758	3	109	2	544	22	2,988	3	1,076	5
INDIANA	2,066	188	46	13	532	52	2,078	183	350	29
IOWA	1,323	0	13	0	333	7	617	0	347	4
KANSAS	2,378	16	21	1	97	1	88	5	326	1
KENTUCKY	1,039	133	105	3	186	11	655	59	87	8
LOUISIANA	4,280	0	299	0	264	0	3,069	0	284	0
MAINE	798	0	6	25	197	2	725	0	24	3
MARYLAND	2,155	81	107	7	244	12	1,471	40	160	7
MASSACHUSETTS	3,334	265	94	3	308	11	1,111	64	369	18
MICHIGAN	4,645	345	73	7	503	59	321	67	753	111
MINNESOTA	2,593	0	159	2	206	0	358	0	308	0
MISSISSIPPI	447	50	13	2	148	6	104	15	40	10
MISSOURI	1,827	0	0	0	177	7	90	6	26	0
MONTANA	425	0	9	0	39	1	3	1	108	2
NEBRASKA	807	0	0	0	38	0	0	0	34	0
NEVADA	348	26	10	1	19	2	64	1	78	7
NEW HAMPSHIRE	767	72	36	4	103	9	272	5	89	9
NEW JERSEY	3,692	172	213	13	725	15	2,469	14	965	35
NEW MEXICO	1,010	–	51	–	123	0	580	–	34	2
NEW YORK	6,727	–	–	–	2,744	–	3,213	–	2,064	–
NORTH CAROLINA	2,238	189	20	3	272	19	971	51	250	27
NORTH DAKOTA	361	0	8	0	74	0	–	0	32	3
OHIO	2,266	133	125	8	372	26	1,570	28	861	45
OKLAHOMA	613	54	233	5	124	2	608	20	81	5
OREGON	1,121	101	38	1	150	16	1,433	12	110	3
PENNSYLVANIA	5,130	221	111	5	874	39	2,344	29	584	31
PUERTO RICO	658	1	63	0	100	0	136	2	10	5
RHODE ISLAND	452	1	91	0	45	2	254	0	109	0
SOUTH CAROLINA	1,402	258	118	9	226	30	617	20	208	31
SOUTH DAKOTA	540	81	27	2	51	7	0	0	17	1
TENNESSEE	2,000	0	130	0	210	2	730	0	255	0
TEXAS	8,760	100	52	5	612	10	978	0	305	5
UTAH	642	91	8	1	74	1	66	–	131	6
VERMONT	95	0	13	0	67	1	197	0	29	0
VIRGINIA	2,713	0	51	0	225	0	1,064	0	384	0
WASHINGTON	2,136	383	61	18	188	15	336	32	240	52
WEST VIRGINIA	884	94	14	2	113	6	392	16	127	25
WISCONSIN	1,995	0	35	5	195	1	–	0	632	9
WYOMING	354	29	13	1	26	4	94	8	36	2
AMERICAN SAMOA	7	–	1	–	0	–	6	–	0	–
GUAM	108	0	1	0	3	0	37	0	10	0
NORTHERN MARIANAS	–	–	–	–	–	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	209	40	7	5	49	4	120	40	12	7
U.S. & INSULAR AREAS	112,330	4,086	3,377	172	13,841	474	39,593	835	16,249	586
50 STATES, D.C. & P.R.	112,006	4,046	3,368	167	13,789	470	39,430	795	16,227	579

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THE TOTALS MAY NOT SUM BECAUSE SOME STATES ONLY REPORTED TOTALS FOR ALL STAFF INSTEAD OF REPORTING BY INDIVIDUAL CATEGORIES.

DATA AS OF OCTOBER 1, 1986.

Table ED2

SCHOOL STAFF OTHER THAN SPECIAL EDUCATION TEACHERS EMPLOYED AND NEEDED TO SERVE HANDICAPPED CHILDREN FOR SCHOOL YEAR 1984-85

STATE	DIAGNOSTIC STAFF		AUDIOLOGISTS		WORK-STUDY COORDINATORS		VOCATIONAL EDUCATION TEACHERS		COUNSELORS	
	EMPLOYED	NEEDED	EMPLOYED	NEEDED	EMPLOYED	NEEDED	EMPLOYED	NEEDED	EMPLOYED	NEEDED
ALABAMA	19	0	31	1	1	0	134	0	23	2
ALASKA	14	1	4	0	14	1	7	0	41	4
ARIZONA	30	1	11	0	29	2	44	1	173	4
ARKANSAS	64	5	2	0	2	0	8	0	7	2
CALIFORNIA	40	0	167	0	0	0	70	0	0	0
COLORADO	0	0	24	0	74	0	2	0	2	0
CONNECTICUT	31	4	9	0	17	4	33	3	162	0
DELAWARE	49	1	2	0	4	1	36	5	34	2
DISTRICT OF COLUMBIA	4	2	1	0	3	0	5	1	12	0
FLORIDA	484	18	28	–	34	2	259	12	671	–
GEORGIA	51	8	34	2	28	4	158	8	203	1
HAWAII	163	6	3	1	7	0	7	0	0	0
IDAHO	5	0	4	0	2	0	2	0	1	0
ILLINOIS	126	–	42	–	–	–	51	2	852	–
INDIANA	27	5	33	4	41	2	97	19	100	2
IOWA	1	0	73	8	118	0	16	8	1	0
KANSAS	–	0	16	0	–	0	39	0	16	1
KENTUCKY	90	6	2	0	20	0	164	6	146	0
LOUISIANA	337	30	15	0	30	0	58	0	15	0
MAINE	165	20	10	5	70	0	126	72	388	21
MARYLAND	64	2	32	4	60	0	162	5	44	3
MASSACHUSETTS	0	0	0	0	0	0	88	10	11	1
MICHIGAN	80	90	18	2	56	0	150	7	0	0
MINNESOTA	209	0	12	0	166	0	375	0	1	0
MISSISSIPPI	80	10	4	2	3	0	82	4	198	15
MISSOURI	360	18	10	0	0	2	0	0	96	4
MONTANA	0	0	6	0	7	0	8	1	2	0
NEBRASKA	77	0	0	0	0	0	0	0	3	0
NEVADA	11	1	3	2	7	0	5	5	15	0
NEW HAMPSHIRE	39	0	1	0	15	0	72	13	219	13
NEW JERSEY	1,565	29	30	2	158	0	564	26	1,397	27
NEW MEXICO	126	2	11	2	4	–	37	–	2	–
NEW YORK	–	–	–	–	–	–	–	–	–	–
NORTH CAROLINA	42	12	33	4	8	1	84	9	131	10
NORTH DAKOTA	0	8	5	0	0	0	33	0	0	–
OHIO	46	8	31	4	222	16	150	11	0	0
OKLAHOMA	67	5	17	0	27	0	94	4	0	0
OREGON	62	4	12	4	68	5	217	6	517	15
PENNSYLVANIA	128	7	33	1	88	4	164	2	150	1
PUERTO RICO	5	0	2	0	0	0	262	0	8	0
RHODE ISLAND	49	1	3	0	14	0	15	0	104	0
SOUTH CAROLINA	23	2	8	3	6	1	161	14	64	6
SOUTH DAKOTA	3	1	1	1	5	0	35	1	11	0
TENNESSEE	60	0	20	1	15	0	100	0	100	0
TEXAS	1,288	28	12	2	5	0	465	3	0	5
UTAH	10	0	13	3	2	1	17	0	8	0
VERMONT	17	0	16	0	15	0	23	0	262	0
VIRGINIA	82	0	12	0	32	0	165	0	0	0
WASHINGTON	64	0	91	0	15	0	68	0	19	0
WEST VIRGINIA	78	11	6	4	10	2	57	9	11	0
WISCONSIN	368	0	4	0	8	0	305	0	10	0
WYOMING	74	9	9	0	4	0	51	2	49	3
AMERICAN SAMOA	5	–	0	–	0	–	2	–	0	–
GUAM	0	0	1	0	1	0	8	0	0	0
NORTHERN MARIANAS	–	–	–	–	–	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	17	5	2	1	2	2	5	5	6	10
U.S. & INSULAR AREAS	6,790	344	966	62	1,515	55	5,339	273	6,284	158
50 STATES, D.C. & P.R.	6,768	339	964	61	1,512	53	5,324	268	6,278	148

THE TOTAL FTE FOR THE U.S. & INSULAR AREAS AND THE 50 STATES, D.C., & PUERTO RICO MAY NOT EQUAL THE SUM OF THE STATES AND INSULAR AREAS BECAUSE OF ROUNDING.

THE TOTALS MAY NOT SUM BECAUSE SOME STATES ONLY REPORTED TOTALS FOR ALL STAFF INSTEAD OF REPORTING BY INDIVIDUAL CATEGORIES.

DATA AS OF OCTOBER 1, 1986.

Table ED2

SCHOOL STAFF OTHER THAN SPECIAL EDUCATION TEACHERS EMPLOYED AND NEEDED TO SERVE HANDICAPPED CHILDREN FOR SCHOOL YEAR 1984-85

STATE	SUPERVISORS/ ADMINISTRATORS (SEA) EMPLOYED	SUPERVISORS/ ADMINISTRATORS (SEA) NEEDED
ALABAMA	18	3
ALASKA	6	0
ARIZONA	15	3
ARKANSAS	4	0
CALIFORNIA	7	0
COLORADO	0	0
CONNECTICUT	0	0
DELAWARE	2	0
DISTRICT OF COLUMBIA	18	3
FLORIDA	28	–
GEORGIA	30	4
HAWAII	5	0
IDAHO	3	0
ILLINOIS	66	–
INDIANA	0	0
IOWA	10	0
KANSAS	6	0
KENTUCKY	73	0
LOUISIANA	71	0
MAINE	16	0
MARYLAND	0	6
MASSACHUSETTS	6	0
MICHIGAN	6	6
MINNESOTA	20	0
MISSISSIPPI	52	6
MISSOURI	0	0
MONTANA	0	0
NEBRASKA	23	0
NEVADA	5	1
NEW HAMPSHIRE	10	0
NEW JERSEY	92	0
NEW MEXICO	9	–
NEW YORK	1	–
NORTH CAROLINA	71	10
NORTH DAKOTA	4	1
OHIO	0	3
OKLAHOMA	15	0
OREGON	14	1
PENNSYLVANIA	26	1
PUERTO RICO	16	0
RHODE ISLAND	16	0
SOUTH CAROLINA	13	4
SOUTH DAKOTA	10	0
TENNESSEE	24	0
TEXAS	0	10
UTAH	2	2
VERMONT	12	2
VIRGINIA	31	0
WASHINGTON	0	0
WEST VIRGINIA	9	6
WISCONSIN	40	0
WYOMING	4	1
AMERICAN SAMOA	2	–
GUAM	3	0
NORTHERN MARIANAS	–	–
TRUST TERRITORIES	–	–
VIRGIN ISLANDS	–	–
BUR. OF INDIAN AFFAIRS	6	0
U.S. & INSULAR AREAS	925	73
50 STATES, D.C. & P.R.	914	73

THE TOTAL FTE FOR THE U.S. & INSULAR AREAS AND THE 50 STATES, D.C., & PUERTO RICO MAY NOT EQUAL THE SUM OF THE STATES AND INSULAR AREAS BECAUSE OF ROUNDING.

THE TOTALS MAY NOT SUM BECAUSE SOME STATES ONLY REPORTED TOTALS FOR ALL STAFF INSTEAD OF REPORTING BY INDIVIDUAL CATEGORIES.

DATA AS OF OCTOBER 1, 1986.

Table EE1

NUMBER OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

ALL CONDITIONS

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	1,276	1,744	55	1,019	532	4,626
ALASKA	204	42	7	113	183	549
ARIZONA	1,608	97	88	478	562	2,833
ARKANSAS	1,571	402	54	570	312	2,909
CALIFORNIA	5,365	0	1,422	4,119	3,729	14,635
COLORADO	1,515	0	18	1,122	703	3,358
CONNECTICUT	1,801	832	189	1,100	432	4,354
DELAWARE	339	112	90	277	122	940
DISTRICT OF COLUMBIA	63	19	29	12	23	146
FLORIDA	1,543	2,122	7	1,805	963	6,440
GEORGIA	2,099	897	76	1,916	1,259	6,247
HAWAII	131	141	24	128	132	556
IDAHO	390	107	5	185	89	776
ILLINOIS	0	0	56	0	11,423	11,479
INDIANA	2,824	400	231	1,287	747	5,489
IOWA	2,048	232	34	705	874	3,893
KANSAS	1,507	237	60	472	490	2,766
KENTUCKY	1,938	378	65	1,874	795	5,050
LOUISIANA	871	1,405	102	1,442	862	4,682
MAINE	564	154	58	120	0	896
MARYLAND	2,975	544	0	555	0	4,074
MASSACHUSETTS	0	469	528	444	0	1,441
MICHIGAN	6,513	635	599	1,894	96	9,737
MINNESOTA	3,270	135	0	540	0	3,945
MISSISSIPPI	705	1,692	69	840	312	3,618
MISSOURI	2,610	699	306	2,858	769	7,242
MONTANA	452	46	17	144	155	814
NEBRASKA	993	303	121	42	52	1,511
NEVADA	208	166	2	56	9	441
NEW HAMPSHIRE	573	0	28	429	223	1,253
NEW JERSEY	2,866	0	236	801	0	3,903
NEW MEXICO	785	102	10	438	327	1,662
NEW YORK	-	6,081	1,435	4,261	2,433	14,210
NORTH CAROLINA	3,144	1,361	204	1,747	674	7,130
NORTH DAKOTA	330	59	6	94	75	564
OHIO	7,002	155	28	1,774	1,733	10,692
OKLAHOMA	2,698	10	60	762	479	4,009
OREGON	983	387	11	249	176	1,806
PENNSYLVANIA	6,718	1,182	309	2,361	1,151	11,721
PUERTO RICO	96	0	136	666	546	1,444
RHODE ISLAND	304	69	40	211	1,326	1,950
SOUTH CAROLINA	1,366	818	242	1,028	624	4,078
SOUTH DAKOTA	0	872	21	0	0	893
TENNESSEE	-	-	-	-	-	5,785
TEXAS	3,583	5,318	0	0	0	8,901
UTAH	1,087	158	71	321	90	1,727
VERMONT	17	0	0	54	12	83
VIRGINIA	1,497	1,265	88	1,507	881	5,238
WASHINGTON	1,764	524	255	1,062	389	3,994
WEST VIRGINIA	1,518	29	1	710	269	2,527
WISCONSIN	1,066	124	224	112	171	1,697
WYOMING	367	27	9	72	107	582
AMERICAN SAMOA	0	0	1	1	9	11
GUAM	59	0	0	34	50	143
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	80	16	37	64	26	223
U.S. & INSULAR AREAS	83,286	32,567	7,764	44,875	37,396	211,673
50 STATES, D.C. & P.R.	83,147	32,551	7,726	44,776	37,311	211,296

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE U.S. AND INSULAR AREAS AND 50 STATES, D.C. AND PUERTO RICO TOTALS WILL NOT SUM TO THE TOTALS SHOWN.

DATA AS OF OCTOBER 1, 1986.

Table EE1

PROPORTION OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

ALL CONDITIONS

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	27.58	37.70	1.19	22.03	11.50	100.00
ALASKA	37.16	7.65	1.28	20.58	33.33	100.00
ARIZONA	56.76	3.42	3.11	16.87	19.84	100.00
ARKANSAS	54.00	13.82	1.86	19.59	10.73	100.00
CALIFORNIA	36.66	0.00	9.72	28.14	25.48	100.00
COLORADO	45.12	0.00	0.54	33.41	20.94	100.00
CONNECTICUT	41.36	19.11	4.34	25.26	9.92	100.00
DELAWARE	36.06	11.91	9.57	29.47	12.98	100.00
DISTRICT OF COLUMBIA	43.15	13.01	19.86	8.22	15.75	100.00
FLORIDA	23.96	32.95	0.11	28.03	14.95	100.00
GEORGIA	33.60	14.36	1.22	30.67	20.15	100.00
HAWAII	23.56	25.36	4.32	23.02	23.74	100.00
IDAHO	50.26	13.79	0.64	23.84	11.47	100.00
ILLINOIS	0.00	0.00	0.49	0.00	99.51	100.00
INDIANA	51.45	7.29	4.21	23.45	13.61	100.00
IOWA	52.61	5.96	0.87	18.11	22.45	100.00
KANSAS	54.48	8.57	2.17	17.06	17.72	100.00
KENTUCKY	38.38	7.49	1.29	37.11	15.74	100.00
LOUISIANA	18.60	30.01	2.18	30.80	18.41	100.00
MAINE	62.95	17.19	6.47	13.39	0.00	100.00
MARYLAND	73.02	13.35	0.00	13.62	0.00	100.00
MASSACHUSETTS	0.00	32.55	36.64	30.81	0.00	100.00
MICHIGAN	66.89	6.52	6.15	19.45	0.99	100.00
MINNESOTA	82.89	3.42	0.00	13.69	0.00	100.00
MISSISSIPPI	19.49	46.77	1.91	23.22	8.62	100.00
MISSOURI	36.04	9.65	4.23	39.46	10.62	100.00
MONTANA	55.53	5.65	2.09	17.69	19.04	100.00
NEBRASKA	65.72	20.05	8.01	2.78	3.44	100.00
NEVADA	47.17	37.64	0.45	12.70	2.04	100.00
NEW HAMPSHIRE	45.73	0.00	2.23	34.24	17.80	100.00
NEW JERSEY	73.43	0.00	6.05	20.52	0.00	100.00
NEW MEXICO	47.23	6.14	0.60	26.35	19.68	100.00
NEW YORK	-	42.79	10.10	29.99	17.12	100.00
NORTH CAROLINA	44.10	19.09	2.86	24.50	9.45	100.00
NORTH DAKOTA	58.51	10.46	1.06	16.67	13.30	100.00
OHIO	65.49	1.45	0.26	16.59	16.21	100.00
OKLAHOMA	67.30	0.25	1.50	19.01	11.95	100.00
OREGON	54.43	21.43	0.61	13.79	9.75	100.00
PENNSYLVANIA	57.32	10.08	2.64	20.14	9.82	100.00
PUERTO RICO	6.65	0.00	9.42	46.12	37.81	100.00
RHODE ISLAND	15.59	3.54	2.05	10.82	68.00	100.00
SOUTH CAROLINA	33.50	20.06	5.93	25.21	15.30	100.00
SOUTH DAKOTA	0.00	97.65	2.35	0.00	0.00	100.00
TENNESSEE	-	-	-	-	-	100.00
TEXAS	40.25	59.75	0.00	0.00	0.00	100.00
UTAH	62.94	9.15	4.11	18.59	5.21	100.00
VERMONT	20.48	0.00	0.00	65.06	14.46	100.00
VIRGINIA	28.58	24.15	1.68	28.77	16.82	100.00
WASHINGTON	44.17	13.12	6.38	26.59	9.74	100.00
WEST VIRGINIA	60.07	1.15	0.04	28.10	10.65	100.00
WISCONSIN	62.82	7.31	13.20	6.60	10.08	100.00
WYOMING	63.06	4.64	1.55	12.37	18.38	100.00
AMERICAN SAMOA	0.00	0.00	9.09	9.09	81.82	100.00
GUAM	41.26	0.00	0.00	23.78	34.97	100.00
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	35.87	7.17	16.59	28.70	11.66	100.00
U.S. & INSULAR AREAS	39.35	15.39	3.67	21.20	17.67	100.00
50 STATES, D.C. & P.R.	39.35	15.41	3.66	21.19	17.66	100.00

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE PROPORTIONS FOR THE U.S. AND INSULAR AREAS AND THE 50 STATES, D.C. AND PUERTO RICO WILL NOT SUM TO 100 PERCENT.

DATA AS OF OCTOBER 1, 1986.

Table EE1

NUMBER OF STUDENTS 18 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

LEARNING DISABLED

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	785	140	3	248	100	1,276
ALASKA	164	33	4	91	149	441
ARIZONA	1,068	52	11	307	338	1,776
ARKANSAS	848	156	22	291	148	1,465
CALIFORNIA	3,806	0	34	2,223	2,270	8,333
COLORADO	722	0	0	475	59	1,256
CONNECTICUT	1,245	461	7	353	165	2,231
DELAWARE	198	50	30	122	42	442
DISTRICT OF COLUMBIA	47	8	6	10	10	81
FLORIDA	717	309	0	717	134	1,877
GEORGIA	1,304	144	2	754	578	2,782
HAWAII	90	95	9	62	32	288
IDAHO	254	37	0	135	58	484
ILLINOIS	0	0	7	0	5,729	5,736
INDIANA	1,231	31	0	447	285	1,994
IOWA	1,163	23	8	253	254	1,701
KANSAS	678	26	2	208	215	1,129
KENTUCKY	874	35	2	768	211	1,890
LOUISIANA	678	430	3	741	356	2,208
MAINE	243	50	10	44	0	347
MARYLAND	2,048	121	0	336	0	2,505
MASSACHUSETTS	0	164	186	157	0	509
MICHIGAN	3,749	0	0	1,151	96	4,996
MINNESOTA	1,935	0	0	460	0	2,395
MISSISSIPPI	504	623	1	386	150	1,664
MISSOURI	1,235	24	0	744	182	2,185
MONTANA	325	21	1	99	111	557
NEBRASKA	792	181	0	31	36	1,040
NEVADA	164	109	0	22	7	302
NEW HAMPSHIRE	400	0	2	266	139	807
NEW JERSEY	1,811	0	19	160	0	1,990
NEW MEXICO	485	34	0	239	171	929
NEW YORK	–	3,188	139	2,181	1,049	6,557
NORTH CAROLINA	2,112	287	22	888	294	3,603
NORTH DAKOTA	146	15	0	52	40	253
OHIO	2,397	130	14	470	557	3,568
OKLAHOMA	1,580	10	10	450	240	2,290
OREGON	662	317	1	196	142	1,318
PENNSYLVANIA	3,209	84	6	1,030	498	4,827
PUERTO RICO	12	0	0	59	86	157
RHODE ISLAND	231	12	4	115	872	1,234
SOUTH CAROLINA	616	148	47	308	195	1,314
SOUTH DAKOTA	0	363	2	0	0	365
TENNESSEE	–	–	–	–	–	3,145
TEXAS	2,720	3,286	0	0	0	6,006
UTAH	414	25	3	76	11	529
VERMONT	8	0	0	27	2	37
VIRGINIA	1,025	357	30	252	240	1,904
WASHINGTON	1,569	359	30	822	344	3,124
WEST VIRGINIA	880	3	1	278	91	1,253
WISCONSIN	496	0	0	50	0	546
WYOMING	224	8	1	47	74	354
AMERICAN SAMOA	0	0	0	0	0	0
GUAM	23	0	0	20	31	74
NORTHERN MARIANAS	–	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	56	13	8	30	22	129
U.S. & INSULAR AREAS	47,943	11,962	689	19,651	16,813	100,203
50 STATES, D.C. & P.R.	47,864	11,949	681	19,601	16,760	100,000

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE U.S. AND INSULAR AREAS AND 50 STATES, D.C. AND PUERTO RICO TOTALS WILL NOT SUM TO THE TOTALS SHOWN.

DATA AS OF OCTOBER 1, 1986.

Table EE1

PROPORTION OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

LEARNING DISABLED

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	61.52	10.97	0.24	19.44	7.84	100.00
ALASKA	37.19	7.48	0.91	20.63	33.79	100.00
ARIZONA	60.14	2.93	0.62	17.29	19.03	100.00
ARKANSAS	57.88	10.65	1.50	19.86	10.10	100.00
CALIFORNIA	45.67	0.00	0.41	26.68	27.24	100.00
COLORADO	57.48	0.00	0.00	37.82	4.70	100.00
CONNECTICUT	55.80	20.66	0.31	15.82	7.40	100.00
DELAWARE	44.80	11.31	6.79	27.60	9.50	100.00
DISTRICT OF COLUMBIA	58.02	9.88	7.41	12.35	12.35	100.00
FLORIDA	38.20	16.46	0.00	38.20	7.14	100.00
GEORGIA	46.87	5.18	0.07	27.10	20.78	100.00
HAWAII	31.25	32.99	3.13	21.53	11.11	100.00
IDAHO	52.48	7.64	0.00	27.89	11.98	100.00
ILLINOIS	0.00	0.00	0.12	0.00	99.88	100.00
INDIANA	61.74	1.55	0.00	22.42	14.29	100.00
IOWA	68.37	1.35	0.47	14.87	14.93	100.00
KANSAS	60.05	2.30	0.18	18.42	19.04	100.00
KENTUCKY	46.24	1.85	0.11	40.63	11.16	100.00
LOUISIANA	30.71	19.47	0.14	33.56	16.12	100.00
MAINE	70.03	14.41	2.88	12.68	0.00	100.00
MARYLAND	81.76	4.83	0.00	13.41	0.00	100.00
MASSACHUSETTS	0.00	32.22	36.94	30.84	0.00	100.00
MICHIGAN	75.04	0.00	0.00	23.04	1.92	100.00
MINNESOTA	80.79	0.00	0.00	19.21	0.00	100.00
MISSISSIPPI	30.29	37.44	0.06	23.20	9.01	100.00
MISSOURI	56.52	1.10	0.00	34.05	8.33	100.00
MONTANA	58.35	3.77	0.18	17.77	19.93	100.00
NEBRASKA	76.15	17.40	0.00	2.98	3.46	100.00
NEVADA	54.30	36.09	0.00	7.28	2.32	100.00
NEW HAMPSHIRE	49.57	0.00	0.25	32.96	17.22	100.00
NEW JERSEY	91.01	0.00	0.95	8.04	0.00	100.00
NEW MEXICO	52.21	3.66	0.00	25.73	18.41	100.00
NEW YORK	–	48.62	2.12	33.26	16.00	100.00
NORTH CAROLINA	58.62	7.97	0.61	24.65	8.16	100.00
NORTH DAKOTA	57.71	5.93	0.00	20.55	15.81	100.00
OHIO	67.18	3.64	0.39	13.17	15.61	100.00
OKLAHOMA	69.00	0.44	0.44	19.65	10.48	100.00
OREGON	50.23	24.05	0.08	14.87	10.77	100.00
PENNSYLVANIA	66.48	1.74	0.12	21.34	10.32	100.00
PUERTO RICO	7.64	0.00	0.00	37.58	54.78	100.00
RHODE ISLAND	18.72	0.97	0.32	9.32	70.66	100.00
SOUTH CAROLINA	46.88	11.26	3.58	23.44	14.84	100.00
SOUTH DAKOTA	0.00	99.45	0.55	0.00	0.00	100.00
TENNESSEE	–	–	–	–	–	100.00
TEXAS	45.29	54.71	0.00	0.00	0.00	100.00
UTAH	78.26	4.73	0.57	14.37	2.08	100.00
VERMONT	21.62	0.00	0.00	72.97	5.41	100.00
VIRGINIA	53.83	18.75	1.58	13.24	12.61	100.00
WASHINGTON	50.22	11.49	0.96	26.31	11.01	100.00
WEST VIRGINIA	70.23	0.24	0.08	22.19	7.26	100.00
WISCONSIN	90.84	0.00	0.00	9.16	0.00	100.00
WYOMING	63.28	2.26	0.28	13.28	20.90	100.00
AMERICAN SAMOA	–	–	–	–	–	–
GUAM	31.08	0.00	0.00	27.03	41.89	100.00
NORTHERN MARIANAS	–	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	43.41	10.08	6.20	23.26	17.05	100.00
U.S. & INSULAR AREAS	47.85	11.94	0.69	19.61	16.78	100.00
50 STATES, D.C. & P.R.	47.86	11.95	0.68	19.60	16.76	100.00

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE PROPORTIONS FOR THE U.S. AND INSULAR AREAS AND THE 50 STATES, D.C. AND PUERTO RICO WILL NOT SUM TO 100 PERCENT.

DATA AS OF OCTOBER 1, 1986.

Table EE1

NUMBER OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

SPEECH IMPAIRED

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	20	55	1	28	3	107
ALASKA	4	0	0	0	5	9
ARIZONA	48	3	2	3	59	115
ARKANSAS	34	3	0	6	13	56
CALIFORNIA	265	0	0	133	132	530
COLORADO	36	0	0	54	21	111
CONNECTICUT	57	0	0	55	17	129
DELAWARE	2	1	0	0	0	3
DISTRICT OF COLUMBIA	1	0	0	0	0	1
FLORIDA	438	120	0	105	129	792
GEORGIA	70	42	4	18	54	188
HAWAII	6	2	0	2	2	12
IDAHO	9	2	0	2	1	14
ILLINOIS	0	0	0	0	456	456
INDIANA	327	20	3	92	26	468
IOWA	12	1	0	2	10	25
KANSAS	156	0	0	6	40	202
KENTUCKY	46	2	0	25	28	101
LOUISIANA	23	7	0	56	43	129
MAINE	7	7	1	2	0	17
MARYLAND	258	23	0	36	0	317
MASSACHUSETTS	0	108	122	100	0	330
MICHIGAN	232	0	0	0	0	232
MINNESOTA	90	0	0	0	0	90
MISSISSIPPI	36	50	3	36	28	153
MISSOURI	167	0	0	65	79	311
MONTANA	12	1	1	3	0	17
NEBRASKA	27	23	0	0	0	50
NEVADA	15	1	0	2	1	19
NEW HAMPSHIRE	8	0	0	5	8	21
NEW JERSEY	112	0	4	0	0	116
NEW MEXICO	90	3	2	28	23	146
NEW YORK	–	611	0	458	457	1,526
NORTH CAROLINA	32	8	11	31	19	101
NORTH DAKOTA	30	2	1	4	6	43
OHIO	134	0	0	0	15	149
OKLAHOMA	21	0	0	0	10	31
OREGON	32	12	0	6	3	53
PENNSYLVANIA	641	67	55	91	112	966
PUERTO RICO	4	0	0	12	4	20
RHODE ISLAND	10	0	0	3	25	38
SOUTH CAROLINA	49	8	1	24	22	104
SOUTH DAKOTA	0	15	0	0	0	15
TENNESSEE	–	–	–	–	–	178
TEXAS	57	22	0	0	0	79
UTAH	15	0	0	1	0	16
VERMONT	0	0	0	1	0	1
VIRGINIA	113	24	0	4	10	151
WASHINGTON	–	–	–	–	–	–
WEST VIRGINIA	15	9	0	0	3	27
WISCONSIN	49	0	0	0	6	55
WYOMING	20	1	0	1	1	23
AMERICAN SAMOA	0	0	0	0	0	0
GUAM	0	0	0	0	0	0
NORTHERN MARIANAS	–	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	0	0	12	5	0	17
U.S. & INSULAR AREAS	3,830	1,253	223	1,505	1,871	8,860
50 STATES, D.C. & P.R.	3,830	1,253	211	1,500	1,871	8,843

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE U.S. AND INSULAR AREAS AND 50 STATES, D.C. AND PUERTO RICO TOTALS WILL NOT SUM TO THE TOTALS SHOWN.

DATA AS OF OCTOBER 1, 1986.

Table EE1

PROPORTION OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

SPEECH IMPAIRED

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	18.69	51.40	0.93	26.17	2.80	100.00
ALASKA	44.44	0.00	0.00	0.00	55.56	100.00
ARIZONA	41.74	2.61	1.74	2.61	51.30	100.00
ARKANSAS	60.71	5.36	0.00	10.71	23.21	100.00
CALIFORNIA	50.00	0.00	0.00	25.09	24.91	100.00
COLORADO	32.43	0.00	0.00	48.65	18.92	100.00
CONNECTICUT	44.19	0.00	0.00	42.64	13.18	100.00
DELAWARE	66.67	33.33	0.00	0.00	0.00	100.00
DISTRICT OF COLUMBIA	100.00	0.00	0.00	0.00	0.00	100.00
FLORIDA	55.30	15.15	0.00	13.26	16.29	100.00
GEORGIA	37.23	22.34	2.13	9.57	28.72	100.00
HAWAII	50.00	16.67	0.00	16.67	16.67	100.00
IDAHO	64.29	14.29	0.00	14.29	7.14	100.00
ILLINOIS	0.00	0.00	0.00	0.00	100.00	100.00
INDIANA	69.87	4.27	0.64	19.66	5.56	100.00
IOWA	48.00	4.00	0.00	8.00	40.00	100.00
KANSAS	77.23	0.00	0.00	2.97	19.80	100.00
KENTUCKY	45.54	1.98	0.00	24.75	27.72	100.00
LOUISIANA	17.83	5.43	0.00	43.41	33.33	100.00
MAINE	41.18	41.18	5.88	11.76	0.00	100.00
MARYLAND	81.39	7.26	0.00	11.36	0.00	100.00
MASSACHUSETTS	0.00	32.73	36.97	30.30	0.00	100.00
MICHIGAN	100.00	0.00	0.00	0.00	0.00	100.00
MINNESOTA	100.00	0.00	0.00	0.00	0.00	100.00
MISSISSIPPI	23.53	32.68	1.96	23.53	18.30	100.00
MISSOURI	53.70	0.00	0.00	20.90	25.40	100.00
MONTANA	70.59	5.88	5.88	17.65	0.00	100.00
NEBRASKA	54.00	46.00	0.00	0.00	0.00	100.00
NEVADA	78.95	5.26	0.00	10.53	5.26	100.00
NEW HAMPSHIRE	38.10	0.00	0.00	23.81	38.10	100.00
NEW JERSEY	96.55	0.00	3.45	0.00	0.00	100.00
NEW MEXICO	61.64	2.05	1.37	19.18	15.75	100.00
NEW YORK	-	40.04	0.00	30.01	29.95	100.00
NORTH CAROLINA	31.68	7.92	10.89	30.69	18.81	100.00
NORTH DAKOTA	69.77	4.65	2.33	9.30	13.95	100.00
OHIO	89.93	0.00	0.00	0.00	10.07	100.00
OKLAHOMA	67.74	0.00	0.00	0.00	32.26	100.00
OREGON	60.38	22.64	0.00	11.32	5.66	100.00
PENNSYLVANIA	66.36	6.94	5.69	9.42	11.59	100.00
PUERTO RICO	20.00	0.00	0.00	60.00	20.00	100.00
RHODE ISLAND	26.32	0.00	0.00	7.89	65.79	100.00
SOUTH CAROLINA	47.12	7.69	0.96	23.08	21.15	100.00
SOUTH DAKOTA	0.00	100.00	0.00	0.00	0.00	100.00
TENNESSEE	-	-	-	-	-	100.00
TEXAS	72.15	27.85	0.00	0.00	0.00	100.00
UTAH	93.75	0.00	0.00	6.25	0.00	100.00
VERMONT	0.00	0.00	0.00	100.00	0.00	100.00
VIRGINIA	74.83	15.89	0.00	2.65	6.62	100.00
WASHINGTON	-	-	-	-	-	-
WEST VIRGINIA	55.56	33.33	0.00	0.00	11.11	100.00
WISCONSIN	89.09	0.00	0.00	0.00	10.91	100.00
WYOMING	86.96	4.35	0.00	4.35	4.35	100.00
AMERICAN SAMOA	-	-	-	-	-	-
GUAM	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0.00	0.00	70.59	29.41	0.00	100.00
U.S. & INSULAR AREAS	43.23	14.14	2.52	16.99	21.12	100.00
50 STATES, D.C. & P.R.	43.31	14.17	2.39	16.96	21.16	100.00

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE PROPORTIONS FOR THE U.S. AND INSULAR AREAS AND THE 50 STATES, D.C. AND PUERTO RICO WILL NOT SUM TO 100 PERCENT.

DATA AS OF OCTOBER 1, 1986.

Table EE1

NUMBER OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

MENTALLY RETARDED

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	347	1,498	41	713	179	2,778
ALASKA	24	5	2	8	7	46
ARIZONA	229	17	58	50	47	401
ARKANSAS	632	231	23	249	140	1,275
CALIFORNIA	606	0	945	925	706	3,182
COLORADO	310	0	11	103	184	608
CONNECTICUT	9	80	121	133	54	397
DELAWARE	51	48	37	44	11	191
DISTRICT OF COLUMBIA	10	10	12	1	5	38
FLORIDA	26	1,472	0	563	326	2,387
GEORGIA	282	592	68	485	229	1,656
HAWAII	0	24	9	31	57	121
IDAHO	80	61	5	31	19	196
ILLINOIS	0	0	28	0	2,099	2,127
INDIANA	1,054	270	191	618	325	2,458
IOWA	630	167	14	236	215	1,262
KANSAS	408	40	5	79	78	610
KENTUCKY	873	308	51	833	303	2,368
LOUISIANA	57	842	84	435	181	1,599
MAINE	200	37	33	27	0	297
MARYLAND	348	173	0	89	0	610
MASSACHUSETTS	0	99	113	94	0	306
MICHIGAN	456	627	535	250	0	1,868
MINNESOTA	550	135	0	0	0	685
MISSISSIPPI	133	989	60	393	120	1,695
MISSOURI	746	595	297	1,879	265	3,782
MONTANA	50	16	6	20	15	107
NEBRASKA	0	23	102	4	2	131
NEVADA	7	27	2	7	0	43
NEW HAMPSHIRE	73	0	22	46	22	163
NEW JERSEY	251	0	162	160	0	573
NEW MEXICO	117	50	7	67	47	288
NEW YORK	-	684	410	548	273	1,915
NORTH CAROLINA	706	936	112	610	186	2,550
NORTH DAKOTA	118	31	3	21	9	182
OHIO	3,959	25	0	1,075	702	5,761
OKLAHOMA	990	0	50	295	200	1,535
OREGON	122	27	1	18	5	173
PENNSYLVANIA	2,059	962	219	702	214	4,156
PUERTO RICO	52	0	69	524	342	987
RHODE ISLAND	18	38	22	25	95	198
SOUTH CAROLINA	512	553	169	550	281	2,065
SOUTH DAKOTA	0	289	19	0	0	308
TENNESSEE	-	-	-	-	-	1,376
TEXAS	215	1,086	0	0	0	1,301
UTAH	157	64	33	33	15	302
VERMONT	4	0	0	20	5	29
VIRGINIA	72	761	48	786	528	2,195
WASHINGTON	150	105	165	0	15	435
WEST VIRGINIA	514	14	0	328	133	989
WISCONSIN	304	123	212	22	154	815
WYOMING	34	14	3	8	9	68
AMERICAN SAMOA	0	0	0	0	9	9
GUAM	31	0	0	11	18	60
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	17	3	9	13	4	46
U.S. & INSULAR AREAS	18,593	14,151	4,588	14,162	8,833	61,703
50 STATES, D.C. & P.R.	18,545	14,148	4,579	14,138	8,802	61,588

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE U.S. AND INSULAR AREAS AND 50 STATES, D.C. AND PUERTO RICO TOTALS WILL NOT SUM TO THE TOTALS SHOWN.

DATA AS OF OCTOBER 1, 1986.

Table EE1

PROPORTION OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

MENTALLY RETARDED

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	12.49	53.92	1.48	25.67	6.44	100.00
ALASKA	52.17	10.87	4.35	17.39	15.22	100.00
ARIZONA	57.11	4.24	14.46	12.47	11.72	100.00
ARKANSAS	49.57	18.12	1.80	19.53	10.98	100.00
CALIFORNIA	19.04	0.00	29.70	29.07	22.19	100.00
COLORADO	50.99	0.00	1.81	16.94	30.26	100.00
CONNECTICUT	2.27	20.15	30.48	33.50	13.60	100.00
DELAWARE	26.70	25.13	19.37	23.04	5.76	100.00
DISTRICT OF COLUMBIA	26.32	26.32	31.58	2.63	13.16	100.00
FLORIDA	1.09	61.67	0.00	23.59	13.66	100.00
GEORGIA	17.03	35.75	4.11	29.29	13.83	100.00
HAWAII	0.00	19.83	7.44	25.62	47.11	100.00
IDAHO	40.82	31.12	2.55	15.82	9.69	100.00
ILLINOIS	0.00	0.00	1.32	0.00	98.68	100.00
INDIANA	42.88	10.98	7.77	25.14	13.22	100.00
IOWA	49.92	13.23	1.11	18.70	17.04	100.00
KANSAS	66.89	6.56	0.82	12.95	12.79	100.00
KENTUCKY	36.87	13.01	2.15	35.18	12.80	100.00
LOUISIANA	3.56	52.66	5.25	27.20	11.32	100.00
MAINE	67.34	12.46	11.11	9.09	0.00	100.00
MARYLAND	57.05	28.36	0.00	14.59	0.00	100.00
MASSACHUSETTS	0.00	32.35	36.93	30.72	0.00	100.00
MICHIGAN	24.41	33.57	28.64	13.38	0.00	100.00
MINNESOTA	80.29	19.71	0.00	0.00	0.00	100.00
MISSISSIPPI	7.85	58.35	3.54	23.19	7.08	100.00
MISSOURI	19.73	15.73	7.85	49.68	7.01	100.00
MONTANA	46.73	14.95	5.61	18.69	14.02	100.00
NEBRASKA	0.00	17.56	77.86	3.05	1.53	100.00
NEVADA	16.28	62.79	4.65	16.28	0.00	100.00
NEW HAMPSHIRE	44.79	0.00	13.50	28.22	13.50	100.00
NEW JERSEY	43.80	0.00	28.27	27.92	0.00	100.00
NEW MEXICO	40.62	17.36	2.43	23.26	16.32	100.00
NEW YORK	-	35.72	21.41	28.62	14.26	100.00
NORTH CAROLINA	27.69	36.71	4.39	23.92	7.29	100.00
NORTH DAKOTA	64.84	17.03	1.65	11.54	4.95	100.00
OHIO	68.72	0.43	0.00	18.66	12.19	100.00
OKLAHOMA	64.50	0.00	3.26	19.22	13.03	100.00
OREGON	70.52	15.61	0.58	10.40	2.89	100.00
PENNSYLVANIA	49.54	23.15	5.27	16.89	5.15	100.00
PUERTO RICO	5.27	0.00	6.99	53.09	34.65	100.00
RHODE ISLAND	9.09	19.19	11.11	12.63	47.98	100.00
SOUTH CAROLINA	24.79	26.78	8.18	26.63	13.61	100.00
SOUTH DAKOTA	0.00	93.83	6.17	0.00	0.00	100.00
TENNESSEE	-	-	-	-	-	100.00
TEXAS	16.53	83.47	0.00	0.00	0.00	100.00
UTAH	51.99	21.19	10.93	10.93	4.97	100.00
VERMONT	13.79	0.00	0.00	68.97	17.24	100.00
VIRGINIA	3.28	34.67	2.19	35.81	24.05	100.00
WASHINGTON	34.48	24.14	37.93	0.00	3.45	100.00
WEST VIRGINIA	51.97	1.42	0.00	33.16	13.45	100.00
WISCONSIN	37.30	15.09	26.01	2.70	18.90	100.00
WYOMING	50.00	20.59	4.41	11.76	13.24	100.00
AMERICAN SAMOA	0.00	0.00	0.00	0.00	100.00	100.00
GUAM	51.67	0.00	0.00	18.33	30.00	100.00
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	36.96	6.52	19.57	28.26	8.70	100.00
U.S. & INSULAR AREAS	30.13	22.93	7.44	22.95	14.32	100.00
50 STATES, D.C. & P.R.	30.11	22.97	7.43	22.96	14.29	100.00

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE PROPORTIONS FOR THE U.S. AND INSULAR AREAS AND THE 50 STATES, D.C. AND PUERTO RICO WILL NOT SUM TO 100 PERCENT.

DATA AS OF OCTOBER 1, 1986.

Table EE1

NUMBER OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

EMOTIONALLY DISTURBED

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	39	6	0	22	236	303
ALASKA	2	0	0	11	15	28
ARIZONA	163	18	4	101	75	361
ARKANSAS	4	1	0	11	4	20
CALIFORNIA	113	0	68	153	145	479
COLORADO	266	0	0	441	357	1,064
CONNECTICUT	411	260	51	506	166	1,394
DELAWARE	61	10	3	108	68	250
DISTRICT OF COLUMBIA	3	1	0	1	7	12
FLORIDA	80	106	0	175	313	674
GEORGIA	359	65	2	642	379	1,447
HAWAII	0	5	0	11	12	28
IDAHO	15	2	0	16	8	41
ILLINOIS	0	0	21	0	2,680	2,701
INDIANA	80	15	21	79	68	263
IOWA	175	27	4	209	343	758
KANSAS	170	155	30	162	135	652
KENTUCKY	62	2	0	217	223	504
LOUISIANA	54	57	5	148	224	488
MAINE	70	33	6	19	0	128
MARYLAND	173	40	0	39	0	252
MASSACHUSETTS	0	63	73	61	0	197
MICHIGAN	1,636	0	0	493	0	2,129
MINNESOTA	550	0	0	80	0	630
MISSISSIPPI	4	5	2	6	7	24
MISSOURI	107	0	0	121	190	418
MONTANA	12	5	0	13	16	46
NEBRASKA	104	71	0	5	8	188
NEVADA	12	12	0	25	0	49
NEW HAMPSHIRE	54	0	0	110	47	211
NEW JERSEY	519	0	17	481	0	1,017
NEW MEXICO	53	1	0	91	77	222
NEW YORK	–	966	386	774	194	2,320
NORTH CAROLINA	80	41	20	183	130	454
NORTH DAKOTA	11	2	1	15	16	45
OHIO	56	0	14	126	139	335
OKLAHOMA	29	0	0	17	20	66
OREGON	88	8	4	13	8	121
PENNSYLVANIA	449	38	8	502	278	1,275
PUERTO RICO	0	0	0	8	0	8
RHODE ISLAND	13	8	5	56	124	206
SOUTH CAROLINA	86	36	11	132	111	376
SOUTH DAKOTA	0	65	0	0	0	65
TENNESSEE	–	–	–	–	–	189
TEXAS	215	440	0	0	0	655
UTAH	410	50	17	205	60	742
VERMONT	2	0	0	5	2	9
VIRGINIA	150	54	3	447	81	735
WASHINGTON	0	15	15	225	0	255
WEST VIRGINIA	46	3	0	61	29	139
WISCONSIN	98	0	0	40	0	138
WYOMING	73	3	1	15	21	113
AMERICAN SAMOA	0	0	0	0	0	0
GUAM	0	0	0	3	0	3
NORTHERN MARIANAS	–	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	4	0	2	12	0	18
U.S. & INSULAR AREAS	7,161	2,689	794	7,396	7,016	25,245
50 STATES, D.C. & P.R.	7,157	2,689	792	7,381	7,016	25,224

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE U.S. AND INSULAR AREAS AND 50 STATES, D.C. AND PUERTO RICO TOTALS WILL NOT SUM TO THE TOTALS SHOWN.

DATA AS OF OCTOBER 1, 1986.

Table EE1

PROPORTION OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

EMOTIONALLY DISTURBED

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	12.87	1.98	0.00	7.26	77.89	100.00
ALASKA	7.14	0.00	0.00	39.29	53.57	100.00
ARIZONA	45.15	4.99	1.11	27.98	20.78	100.00
ARKANSAS	20.00	5.00	0.00	55.00	20.00	100.00
CALIFORNIA	23.59	0.00	14.20	31.94	30.27	100.00
COLORADO	25.00	0.00	0.00	41.45	33.55	100.00
CONNECTICUT	29.48	18.65	3.66	36.30	11.91	100.00
DELAWARE	24.40	4.00	1.20	43.20	27.20	100.00
DISTRICT OF COLUMBIA	25.00	8.33	0.00	8.33	58.33	100.00
FLORIDA	11.87	15.73	0.00	25.96	46.44	100.00
GEORGIA	24.81	4.49	0.14	44.37	26.19	100.00
HAWAII	0.00	17.86	0.00	39.29	42.86	100.00
IDAHO	36.59	4.88	0.00	39.02	19.51	100.00
ILLINOIS	0.00	0.00	0.78	0.00	99.22	100.00
INDIANA	30.42	5.70	7.98	30.04	25.86	100.00
IOWA	23.09	3.56	0.53	27.57	45.25	100.00
KANSAS	26.07	23.77	4.60	24.85	20.71	100.00
KENTUCKY	12.30	0.40	0.00	43.06	44.25	100.00
LOUISIANA	11.07	11.68	1.02	30.33	45.90	100.00
MAINE	54.69	25.78	4.69	14.84	0.00	100.00
MARYLAND	68.65	15.87	0.00	15.48	0.00	100.00
MASSACHUSETTS	0.00	31.98	37.06	30.96	0.00	100.00
MICHIGAN	76.84	0.00	0.00	23.16	0.00	100.00
MINNESOTA	87.30	0.00	0.00	12.70	0.00	100.00
MISSISSIPPI	16.67	20.83	8.33	25.00	29.17	100.00
MISSOURI	25.60	0.00	0.00	28.95	45.45	100.00
MONTANA	26.09	10.87	0.00	28.26	34.78	100.00
NEBRASKA	55.32	37.77	0.00	2.66	4.26	100.00
NEVADA	24.49	24.49	0.00	51.02	0.00	100.00
NEW HAMPSHIRE	25.59	0.00	0.00	52.13	22.27	100.00
NEW JERSEY	51.03	0.00	1.67	47.30	0.00	100.00
NEW MEXICO	23.87	0.45	0.00	40.99	34.68	100.00
NEW YORK	-	41.64	16.64	33.36	8.36	100.00
NORTH CAROLINA	17.62	9.03	4.41	40.31	28.63	100.00
NORTH DAKOTA	24.44	4.44	2.22	33.33	35.56	100.00
OHIO	16.72	0.00	4.18	37.61	41.49	100.00
OKLAHOMA	43.94	0.00	0.00	25.76	30.30	100.00
OREGON	72.73	6.61	3.31	10.74	6.61	100.00
PENNSYLVANIA	35.22	2.98	0.63	39.37	21.80	100.00
PUERTO RICO	0.00	0.00	0.00	100.00	0.00	100.00
RHODE ISLAND	6.31	3.88	2.43	27.18	60.19	100.00
SOUTH CAROLINA	22.87	9.57	2.93	35.11	29.52	100.00
SOUTH DAKOTA	0.00	100.00	0.00	0.00	0.00	100.00
TENNESSEE	-	-	-	-	-	100.00
TEXAS	32.82	67.18	0.00	0.00	0.00	100.00
UTAH	55.26	6.74	2.29	27.63	8.09	100.00
VERMONT	22.22	0.00	0.00	55.56	22.22	100.00
VIRGINIA	20.41	7.35	0.41	60.82	11.02	100.00
WASHINGTON	0.00	5.88	5.88	88.24	0.00	100.00
WEST VIRGINIA	33.09	2.16	0.00	43.88	20.86	100.00
WISCONSIN	71.01	0.00	0.00	28.99	0.00	100.00
WYOMING	64.60	2.65	0.88	13.27	18.58	100.00
AMERICAN SAMOA	-	-	-	-	-	-
GUAM	0.00	0.00	0.00	100.00	0.00	100.00
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	22.22	0.00	11.11	66.67	0.00	100.00
U.S. & INSULAR AREAS	28.37	10.65	3.15	29.30	27.79	100.00
50 STATES, D.C. & P.R.	28.37	10.66	3.14	29.26	27.81	100.00

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE PROPORTIONS FOR THE U.S. AND INSULAR AREAS AND THE 50 STATES, D.C. AND PUERTO RICO WILL NOT SUM TO 100 PERCENT.

DATA AS OF OCTOBER 1, 1986.

Table EE1

NUMBER OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

HARD OF HEARING & DEAF

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	18	8	0	0	2	28
ALASKA	3	3	1	0	0	7
ARIZONA	55	0	1	11	8	75
ARKANSAS	26	3	7	7	1	44
CALIFORNIA	180	0	37	128	114	459
COLORADO	81	0	0	6	19	106
CONNECTICUT	28	7	4	17	9	65
DELAWARE	18	0	0	3	0	21
DISTRICT OF COLUMBIA	0	0	0	0	0	0
FLORIDA	33	42	7	15	14	111
GEORGIA	36	32	0	6	8	82
HAWAII	21	9	4	11	8	53
IDAHO	15	0	0	0	1	16
ILLINOIS	0	0	0	0	70	70
INDIANA	84	4	0	28	9	125
IOWA	25	0	0	2	15	42
KANSAS	39	0	3	8	6	56
KENTUCKY	46	0	0	8	3	65
LOUISIANA	23	19	0	11	5	58
MAINE	16	7	1	12	0	36
MARYLAND	43	43	0	11	0	97
MASSACHUSETTS	0	10	3	7	0	20
MICHIGAN	200	5	0	0	0	205
MINNESOTA	45	0	0	0	0	45
MISSISSIPPI	16	13	2	14	3	48
MISSOURI	223	5	0	5	5	238
MONTANA	24	0	1	1	4	30
NEBRASKA	49	2	0	2	0	53
NEVADA	8	9	0	0	1	18
NEW HAMPSHIRE	17	0	0	2	1	20
NEW JERSEY	20	0	4	0	0	24
NEW MEXICO	12	1	0	3	1	17
NEW YORK	-	70	43	51	40	204
NORTH CAROLINA	105	28	2	5	3	143
NORTH DAKOTA	6	1	0	1	0	8
OHIO	207	0	0	39	26	272
OKLAHOMA	34	0	0	0	7	41
OREGON	10	2	2	2	1	17
PENNSYLVANIA	197	4	0	12	22	235
PUERTO RICO	16	0	4	35	39	94
RHODE ISLAND	17	7	2	5	9	40
SOUTH CAROLINA	68	44	0	8	4	124
SOUTH DAKOTA	0	24	0	0	0	24
TENNESSEE	-	-	-	-	-	57
TEXAS	104	183	0	0	0	287
UTAH	17	1	1	1	0	20
VERMONT	1	0	0	1	1	3
VIRGINIA	71	19	0	7	9	106
WASHINGTON	15	0	0	0	0	15
WEST VIRGINIA	23	0	0	1	6	30
WISCONSIN	35	0	4	0	0	39
WYOMING	3	0	0	0	0	3
AMERICAN SAMOA	0	0	0	0	0	0
GUAM	5	0	0	0	0	5
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	0	0	0	0	0
U.S. & INSULAR AREAS	2,338	605	141	486	474	4,101
50 STATES, D.C. & P.R.	2,333	605	141	486	474	4,096

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE U.S. AND INSULAR AREAS AND 50 STATES, D.C. AND PUERTO RICO TOTALS WILL NOT SUM TO THE TOTALS SHOWN.

DATA AS OF OCTOBER 1, 1986.

Table EE1

PROPORTION OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

HARD OF HEARING & DEAF

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	64.29	28.57	0.00	0.00	7.14	100.00
ALASKA	42.86	42.86	14.29	0.00	0.00	100.00
ARIZONA	73.33	0.00	1.33	14.67	10.67	100.00
ARKANSAS	59.09	6.82	15.91	15.91	2.27	100.00
CALIFORNIA	39.22	0.00	8.06	27.89	24.84	100.00
COLORADO	76.42	0.00	0.00	5.66	17.92	100.00
CONNECTICUT	43.08	10.77	6.15	26.15	13.85	100.00
DELAWARE	85.71	0.00	0.00	14.29	0.00	100.00
DISTRICT OF COLUMBIA	-	-	-	-	-	-
FLORIDA	29.73	37.84	6.31	13.51	12.61	100.00
GEORGIA	43.90	39.02	0.00	7.32	9.76	100.00
HAWAII	39.62	16.98	7.55	20.75	15.09	100.00
IDAHO	93.75	0.00	0.00	0.00	6.25	100.00
ILLINOIS	0.00	0.00	0.00	0.00	100.00	100.00
INDIANA	67.20	3.20	0.00	22.40	7.20	100.00
IOWA	59.52	0.00	0.00	4.76	35.71	100.00
KANSAS	69.64	0.00	5.36	14.29	10.71	100.00
KENTUCKY	70.77	0.00	12.31	12.31	4.62	100.00
LOUISIANA	39.66	32.76	0.00	18.97	8.62	100.00
MAINE	44.44	19.44	2.78	33.33	0.00	100.00
MARYLAND	44.33	44.33	0.00	11.34	0.00	100.00
MASSACHUSETTS	0.00	50.00	15.00	35.00	0.00	100.00
MICHIGAN	97.56	2.44	0.00	0.00	0.00	100.00
MINNESOTA	100.00	0.00	0.00	0.00	0.00	100.00
MISSISSIPPI	33.33	27.08	4.17	29.17	6.25	100.00
MISSOURI	93.70	2.10	0.00	2.10	2.10	100.00
MONTANA	80.00	0.00	3.33	3.33	13.33	100.00
NEBRASKA	92.45	3.77	0.00	3.77	0.00	100.00
NEVADA	44.44	50.00	0.00	0.00	5.56	100.00
NEW HAMPSHIRE	85.00	0.00	0.00	10.00	5.00	100.00
NEW JERSEY	83.33	0.00	16.67	0.00	0.00	100.00
NEW MEXICO	70.59	5.88	0.00	17.65	5.88	100.00
NEW YORK	-	34.31	21.08	25.00	19.61	100.00
NORTH CAROLINA	73.43	19.58	1.40	3.50	2.10	100.00
NORTH DAKOTA	75.00	12.50	0.00	12.50	0.00	100.00
OHIO	76.10	0.00	0.00	14.34	9.56	100.00
OKLAHOMA	82.93	0.00	0.00	0.00	17.07	100.00
OREGON	58.82	11.76	11.76	11.76	5.88	100.00
PENNSYLVANIA	83.83	1.70	0.00	5.11	9.36	100.00
PUERTO RICO	17.02	0.00	4.26	37.23	41.49	100.00
RHODE ISLAND	42.50	17.50	5.00	12.50	22.50	100.00
SOUTH CAROLINA	54.84	35.48	0.00	6.45	3.23	100.00
SOUTH DAKOTA	0.00	100.00	0.00	0.00	0.00	100.00
TENNESSEE	-	-	-	-	-	100.00
TEXAS	36.24	63.76	0.00	0.00	0.00	100.00
UTAH	85.00	5.00	5.00	5.00	0.00	100.00
VERMONT	33.33	0.00	0.00	33.33	33.33	100.00
VIRGINIA	66.98	17.92	0.00	6.60	8.49	100.00
WASHINGTON	100.00	0.00	0.00	0.00	0.00	100.00
WEST VIRGINIA	76.67	0.00	0.00	3.33	20.00	100.00
WISCONSIN	89.74	0.00	10.26	0.00	0.00	100.00
WYOMING	100.00	0.00	0.00	0.00	0.00	100.00
AMERICAN SAMOA	-	-	-	-	-	-
GUAM	100.00	0.00	0.00	0.00	0.00	100.00
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	-	-	-	-	-	-
U.S. & INSULAR AREAS	57.01	14.75	3.44	11.85	11.56	100.00
50 STATES, D.C. & P.R.	56.96	14.77	3.44	11.87	11.57	100.00

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE PROPORTIONS FOR THE U.S. AND INSULAR AREAS AND THE 50 STATES, D.C. AND PUERTO RICO WILL NOT SUM TO 100 PERCENT.

DATA AS OF OCTOBER 1, 1986.

Table EE1

NUMBER OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

MULTIHANDICAPPED

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	2	25	9	1	5	42
ALASKA	3	1	0	0	2	6
ARIZONA	8	2	10	1	7	28
ARKANSAS	3	7	2	0	1	13
CALIFORNIA	23	0	174	285	106	588
COLORADO	57	0	0	29	38	124
CONNECTICUT	0	6	2	12	4	24
DELAWARE	0	1	0	0	0	1
DISTRICT OF COLUMBIA	0	0	0	0	1	1
FLORIDA	0	0	0	0	0	0
GEORGIA	-	-	-	-	-	-
HAWAII	0	0	0	0	14	14
IDAHO	3	1	0	0	1	5
ILLINOIS	-	-	-	-	-	-
INDIANA	0	42	16	14	27	99
IOWA	4	11	5	0	32	52
KANSAS	10	10	18	2	5	45
KENTUCKY	9	15	3	14	1	42
LOUISIANA	0	25	5	6	13	49
MAINE	9	9	6	2	0	26
MARYLAND	80	88	0	27	0	195
MASSACHUSETTS	0	10	12	11	0	33
MICHIGAN	0	0	64	0	0	64
MINNESOTA	-	-	-	-	-	-
MISSISSIPPI	0	2	0	0	0	2
MISSOURI	24	42	9	24	19	118
MONTANA	18	2	5	7	2	34
NEBRASKA	0	2	13	0	6	21
NEVADA	0	8	0	0	0	8
NEW HAMPSHIRE	0	0	3	0	1	4
NEW JERSEY	70	0	27	0	0	97
NEW MEXICO	14	10	1	5	2	32
NEW YORK	-	126	210	126	126	588
NORTH CAROLINA	32	24	27	17	20	120
NORTH DAKOTA	1	8	0	0	2	11
OHIO	30	0	0	20	20	70
OKLAHOMA	20	0	0	0	2	22
OREGON	0	0	0	0	0	0
PENNSYLVANIA	5	10	16	0	1	32
PUERTO RICO	0	0	51	8	28	87
RHODE ISLAND	0	0	0	0	0	0
SOUTH CAROLINA	0	2	10	4	1	17
SOUTH DAKOTA	0	83	0	0	0	83
TENNESSEE	-	-	-	-	-	38
TEXAS	11	91	0	0	0	102
UTAH	35	15	16	5	4	75
VERMONT	0	0	0	0	1	1
VIRGINIA	23	17	2	2	8	52
WASHINGTON	0	15	15	0	0	30
WEST VIRGINIA	-	-	-	-	-	-
WISCONSIN	30	0	0	0	0	30
WYOMING	4	0	3	0	1	8
AMERICAN SAMOA	0	0	0	0	0	0
GUAM	0	0	0	0	1	1
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	0	4	2	0	6
U.S. & INSULAR AREAS	528	710	738	624	502	3,140
50 STATES, D.C. & P.R.	528	710	734	622	501	3,133

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE U.S. AND INSULAR AREAS AND 50 STATES, D.C. AND PUERTO RICO TOTALS WILL NOT SUM TO THE TOTALS SHOWN.

DATA AS OF OCTOBER 1, 1986.

Table EE1

PROPORTION OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

MULTIHANDICAPPED

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	4.76	59.52	21.43	2.38	11.90	100.00
ALASKA	50.00	16.67	0.00	0.00	33.33	100.00
ARIZONA	28.57	7.14	35.71	3.57	25.00	100.00
ARKANSAS	23.08	53.85	15.38	0.00	7.69	100.00
CALIFORNIA	3.91	0.00	29.59	48.47	18.03	100.00
COLORADO	45.97	0.00	0.00	23.39	30.65	100.00
CONNECTICUT	0.00	25.00	8.33	50.00	16.67	100.00
DELAWARE	0.00	100.00	0.00	0.00	0.00	100.00
DISTRICT OF COLUMBIA	0.00	0.00	0.00	0.00	100.00	100.00
FLORIDA	-	-	-	-	-	-
GEORGIA	-	-	-	-	-	-
HAWAII	0.00	0.00	0.00	0.00	100.00	100.00
IDAHO	60.00	20.00	0.00	0.00	20.00	100.00
ILLINOIS	-	-	-	-	-	-
INDIANA	0.00	42.42	16.16	14.14	27.27	100.00
IOWA	7.69	21.15	9.62	0.00	61.54	100.00
KANSAS	22.22	22.22	40.00	4.44	11.11	100.00
KENTUCKY	21.43	35.71	7.14	33.33	2.38	100.00
LOUISIANA	0.00	51.02	10.20	12.24	26.53	100.00
MAINE	34.62	34.62	23.08	7.69	0.00	100.00
MARYLAND	41.03	45.13	0.00	13.85	0.00	100.00
MASSACHUSETTS	0.00	30.30	36.36	33.33	0.00	100.00
MICHIGAN	0.00	0.00	100.00	0.00	0.00	100.00
MINNESOTA	-	-	-	-	-	-
MISSISSIPPI	0.00	100.00	0.00	0.00	0.00	100.00
MISSOURI	20.34	35.59	7.63	20.34	16.10	100.00
MONTANA	52.94	5.88	14.71	20.59	5.88	100.00
NEBRASKA	0.00	9.52	61.90	0.00	28.57	100.00
NEVADA	0.00	100.00	0.00	0.00	0.00	100.00
NEW HAMPSHIRE	0.00	0.00	75.00	0.00	25.00	100.00
NEW JERSEY	72.16	0.00	27.84	0.00	0.00	100.00
NEW MEXICO	43.75	31.25	3.13	15.62	6.25	100.00
NEW YORK	-	21.43	35.71	21.43	21.43	100.00
NORTH CAROLINA	26.67	20.00	22.50	14.17	16.67	100.00
NORTH DAKOTA	9.09	72.73	0.00	0.00	18.18	100.00
OHIO	42.86	0.00	0.00	28.57	28.57	100.00
OKLAHOMA	90.91	0.00	0.00	0.00	9.09	100.00
OREGON	-	-	-	-	-	-
PENNSYLVANIA	15.62	31.25	50.00	0.00	3.13	100.00
PUERTO RICO	0.00	0.00	58.62	9.20	32.18	100.00
RHODE ISLAND	-	-	-	-	-	-
SOUTH CAROLINA	0.00	11.76	58.82	23.53	5.88	100.00
SOUTH DAKOTA	0.00	100.00	0.00	0.00	0.00	100.00
TENNESSEE	-	-	-	-	-	100.00
TEXAS	10.78	89.22	0.00	0.00	0.00	100.00
UTAH	46.67	20.00	21.33	6.67	5.33	100.00
VERMONT	0.00	0.00	0.00	0.00	100.00	100.00
VIRGINIA	44.23	32.69	3.85	3.85	15.38	100.00
WASHINGTON	0.00	50.00	50.00	0.00	0.00	100.00
WEST VIRGINIA	-	-	-	-	-	-
WISCONSIN	100.00	0.00	0.00	0.00	0.00	100.00
WYOMING	50.00	0.00	37.50	0.00	12.50	100.00
AMERICAN SAMOA	-	-	-	-	-	-
GUAM	0.00	0.00	0.00	0.00	100.00	100.00
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0.00	0.00	66.67	33.33	0.00	100.00
U.S. & INSULAR AREAS	16.82	22.61	23.50	19.87	15.99	100.00
50 STATES, D.C. & P.R.	16.85	22.66	23.43	19.85	15.99	100.00

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE PROPORTIONS FOR THE U.S. AND INSULAR AREAS AND THE 50 STATES, D.C. AND PUERTO RICO WILL NOT SUM TO 100 PERCENT.

DATA AS OF OCTOBER 1, 1986.

Table EE1

NUMBER OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

ORTHOPEDICALLY IMPAIRED

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	11	2	0	4	2	19
ALASKA	1	0	0	1	5	7
ARIZONA	18	0	1	1	1	21
ARKANSAS	5	0	0	0	0	5
CALIFORNIA	147	0	51	111	93	402
COLORADO	27	0	0	9	16	52
CONNECTICUT	7	5	4	6	4	26
DELAWARE	1	0	9	0	0	10
DISTRICT OF COLUMBIA	2	0	6	0	0	8
FLORIDA	79	7	0	66	21	173
GEORGIA	16	9	0	5	3	33
HAWAII	11	5	1	11	6	34
IDAHO	4	2	0	0	0	6
ILLINOIS	0	0	0	0	113	113
INDIANA	19	10	0	6	5	40
IOWA	30	0	1	2	3	36
KANSAS	3	0	0	0	2	5
KENTUCKY	7	9	0	3	3	22
LOUISIANA	10	8	4	6	6	34
MAINE	7	0	0	4	0	11
MARYLAND	17	12	0	4	0	33
MASSACHUSETTS	0	5	6	5	0	16
MICHIGAN	199	0	0	0	0	199
MINNESOTA	30	0	0	0	0	30
MISSISSIPPI	8	9	1	5	1	24
MISSOURI	47	0	0	10	19	76
MONTANA	1	0	0	0	0	1
NEBRASKA	13	1	5	0	0	19
NEVADA	1	0	0	0	0	1
NEW HAMPSHIRE	7	0	1	0	0	8
NEW JERSEY	19	0	2	0	0	21
NEW MEXICO	8	1	0	3	3	15
NEW YORK	–	58	43	14	29	144
NORTH CAROLINA	15	11	3	0	4	33
NORTH DAKOTA	5	0	0	1	0	6
OHIO	174	0	0	14	274	462
OKLAHOMA	9	0	0	0	0	9
OREGON	32	9	1	4	8	54
PENNSYLVANIA	58	13	2	9	21	103
PUERTO RICO	0	0	4	12	4	20
RHODE ISLAND	4	0	3	0	6	13
SOUTH CAROLINA	21	26	2	0	5	54
SOUTH DAKOTA	0	13	0	0	0	13
TENNESSEE	–	–	–	–	–	117
TEXAS	71	59	0	0	0	130
UTAH	19	0	1	0	0	20
VERMONT	2	0	0	0	0	2
VIRGINIA	11	18	1	1	0	31
WASHINGTON	0	0	30	0	0	30
WEST VIRGINIA	5	0	0	1	0	6
WISCONSIN	21	0	8	0	8	37
WYOMING	2	1	0	0	0	3
AMERICAN SAMOA	0	0	1	0	0	1
GUAM	0	0	0	0	0	0
NORTHERN MARIANAS	–	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	1	0	2	0	0	3
U.S. & INSULAR AREAS	1,205	293	193	318	665	2,791
50 STATES, D.C. & P.R.	1,204	293	190	318	665	2,787

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE U.S. AND INSULAR AREAS AND 50 STATES, D.C. AND PUERTO RICO TOTALS WILL NOT SUM TO THE TOTALS SHOWN.

DATA AS OF OCTOBER 1, 1986.

Table EE1

PROPORTION OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

ORTHOPEDICALLY IMPAIRED

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	57.89	10.53	0.00	21.05	10.53	100.00
ALASKA	14.29	0.00	0.00	14.29	71.43	100.00
ARIZONA	85.71	0.00	4.76	4.76	4.76	100.00
ARKANSAS	100.00	0.00	0.00	0.00	0.00	100.00
CALIFORNIA	36.57	0.00	12.69	27.61	23.13	100.00
COLORADO	51.92	0.00	0.00	17.31	30.77	100.00
CONNECTICUT	26.92	19.23	15.38	23.08	15.38	100.00
DELAWARE	10.00	0.00	90.00	0.00	0.00	100.00
DISTRICT OF COLUMBIA	25.00	0.00	75.00	0.00	0.00	100.00
FLORIDA	45.66	4.05	0.00	38.15	12.14	100.00
GEORGIA	48.48	27.27	0.00	15.15	9.09	100.00
HAWAII	32.35	14.71	2.94	32.35	17.65	100.00
IDAHO	66.67	33.33	0.00	0.00	0.00	100.00
ILLINOIS	0.00	0.00	0.00	0.00	100.00	100.00
INDIANA	47.50	25.00	0.00	15.00	12.50	100.00
IOWA	83.33	0.00	2.78	5.56	8.33	100.00
KANSAS	60.00	0.00	0.00	0.00	40.00	100.00
KENTUCKY	31.82	40.91	0.00	13.64	13.64	100.00
LOUISIANA	29.41	23.53	11.76	17.65	17.65	100.00
MAINE	63.64	0.00	0.00	36.36	0.00	100.00
MARYLAND	51.52	36.36	0.00	12.12	0.00	100.00
MASSACHUSETTS	0.00	31.25	37.50	31.25	0.00	100.00
MICHIGAN	100.00	0.00	0.00	0.00	0.00	100.00
MINNESOTA	100.00	0.00	0.00	0.00	0.00	100.00
MISSISSIPPI	33.33	37.50	4.17	20.83	4.17	100.00
MISSOURI	61.84	0.00	0.00	13.16	25.00	100.00
MONTANA	100.00	0.00	0.00	0.00	0.00	100.00
NEBRASKA	68.42	5.26	26.32	0.00	0.00	100.00
NEVADA	100.00	0.00	0.00	0.00	0.00	100.00
NEW HAMPSHIRE	87.50	0.00	12.50	0.00	0.00	100.00
NEW JERSEY	90.48	0.00	9.52	0.00	0.00	100.00
NEW MEXICO	53.33	6.67	0.00	20.00	20.00	100.00
NEW YORK	–	40.28	29.86	9.72	20.14	100.00
NORTH CAROLINA	45.45	33.33	9.09	0.00	12.12	100.00
NORTH DAKOTA	83.33	0.00	0.00	16.67	0.00	100.00
OHIO	37.66	0.00	0.00	3.03	59.31	100.00
OKLAHOMA	100.00	0.00	0.00	0.00	0.00	100.00
OREGON	59.26	16.67	1.85	7.41	14.81	100.00
PENNSYLVANIA	56.31	12.62	1.94	8.74	20.39	100.00
PUERTO RICO	0.00	0.00	20.00	60.00	20.00	100.00
RHODE ISLAND	30.77	0.00	23.08	0.00	46.15	100.00
SOUTH CAROLINA	38.89	48.15	3.70	0.00	9.26	100.00
SOUTH DAKOTA	0.00	100.00	0.00	0.00	0.00	100.00
TENNESSEE	–	–	–	–	–	100.00
TEXAS	54.62	45.38	0.00	0.00	0.00	100.00
UTAH	95.00	0.00	5.00	0.00	0.00	100.00
VERMONT	100.00	0.00	0.00	0.00	0.00	100.00
VIRGINIA	35.48	58.06	3.23	3.23	0.00	100.00
WASHINGTON	0.00	0.00	100.00	0.00	0.00	100.00
WEST VIRGINIA	83.33	0.00	0.00	16.67	0.00	100.00
WISCONSIN	56.76	0.00	21.62	0.00	21.62	100.00
WYOMING	66.67	33.33	0.00	0.00	0.00	100.00
AMERICAN SAMOA	0.00	0.00	100.00	0.00	0.00	100.00
GUAM	–	–	–	–	–	–
NORTHERN MARIANAS	–	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	33.33	0.00	66.67	0.00	0.00	100.00
U.S. & INSULAR AREAS	43.17	10.50	6.92	11.39	23.83	100.00
50 STATES, D.C. & P.R.	43.20	10.51	6.82	11.41	23.86	100.00

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE PROPORTIONS FOR THE U.S. AND INSULAR AREAS AND THE 50 STATES, D.C. AND PUERTO RICO WILL NOT SUM TO 100 PERCENT.

DATA AS OF OCTOBER 1, 1986.

Table EE1

NUMBER OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

OTHER HEALTH IMPAIRED

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	13	2	0	0	2	17
ALASKA	1	0	0	1	0	2
ARIZONA	10	0	0	3	23	36
ARKANSAS	2	0	0	2	1	5
CALIFORNIA	165	0	58	129	133	485
COLORADO	-	-	-	-	-	-
CONNECTICUT	39	11	0	17	13	80
DELAWARE	0	0	0	0	0	0
DISTRICT OF COLUMBIA	0	0	3	0	0	3
FLORIDA	137	66	0	137	0	340
GEORGIA	14	4	0	1	2	21
HAWAII	-	-	-	-	-	-
IDAHO	7	1	0	1	0	9
ILLINOIS	0	0	0	0	251	251
INDIANA	1	0	0	0	1	2
IOWA	-	-	-	-	-	-
KANSAS	36	2	0	7	7	52
KENTUCKY	7	4	0	4	22	37
LOUISIANA	19	8	0	36	30	93
MAINE	10	9	0	2	0	21
MARYLAND	8	7	0	7	0	22
MASSACHUSETTS	0	7	7	7	0	21
MICHIGAN	0	0	0	0	0	0
MINNESOTA	44	0	0	0	0	44
MISSISSIPPI	-	-	-	-	-	-
MISSOURI	24	0	0	0	10	34
MONTANA	5	0	3	0	6	14
NEBRASKA	-	-	-	-	-	-
NEVADA	-	-	-	-	-	-
NEW HAMPSHIRE	6	0	0	0	5	11
NEW JERSEY	61	0	1	0	0	62
NEW MEXICO	4	2	0	0	3	9
NEW YORK	-	340	170	87	256	853
NORTH CAROLINA	31	17	7	9	13	77
NORTH DAKOTA	3	0	0	0	1	4
OHIO	-	-	-	-	-	-
OKLAHOMA	8	0	0	0	0	8
OREGON	31	9	2	8	6	56
PENNSYLVANIA	-	-	-	-	-	-
PUERTO RICO	4	0	0	4	27	35
RHODE ISLAND	11	0	0	7	190	208
SOUTH CAROLINA	0	1	1	0	0	2
SOUTH DAKOTA	0	7	0	0	0	7
TENNESSEE	-	-	-	-	-	663
TEXAS	156	106	0	0	0	262
UTAH	14	0	0	0	0	14
VERMONT	-	-	-	-	1	1
VIRGINIA	8	6	1	4	2	21
WASHINGTON	15	30	0	15	30	90
WEST VIRGINIA	17	0	0	22	7	46
WISCONSIN	20	0	0	0	3	23
WYOMING	5	0	0	1	0	6
AMERICAN SAMOA	0	0	0	0	0	0
GUAM	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	2	0	0	0	0	2
U.S. & INSULAR AREAS	938	639	253	511	1,045	4,049
50 STATES, D.C. & P.R.	936	639	253	511	1,045	4,047

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE U.S. AND INSULAR AREAS AND 50 STATES, D.C. AND PUERTO RICO TOTALS WILL NOT SUM TO THE TOTALS SHOWN.

DATA AS OF OCTOBER 1, 1986.

Table EE1

PROPORTION OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

OTHER HEALTH IMPAIRED

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	76.47	11.76	0.00	0.00	11.76	100.00
ALASKA	50.00	0.00	0.00	50.00	0.00	100.00
ARIZONA	27.78	0.00	0.00	8.33	63.89	100.00
ARKANSAS	40.00	0.00	0.00	40.00	20.00	100.00
CALIFORNIA	34.02	0.00	11.96	26.60	27.42	100.00
COLORADO	-	-	-	-	-	-
CONNECTICUT	48.75	13.75	0.00	21.25	16.25	100.00
DELAWARE	-	-	-	-	-	-
DISTRICT OF COLUMBIA	0.00	0.00	100.00	0.00	0.00	100.00
FLORIDA	40.29	19.41	0.00	40.29	0.00	100.00
GEORGIA	66.67	19.05	0.00	4.76	9.52	100.00
HAWAII	-	-	-	-	-	-
IDAHO	77.78	11.11	0.00	11.11	0.00	100.00
ILLINOIS	0.00	0.00	0.00	0.00	100.00	100.00
INDIANA	50.00	0.00	0.00	0.00	50.00	100.00
IOWA	-	-	-	-	-	-
KANSAS	69.23	3.85	0.00	13.46	13.46	100.00
KENTUCKY	18.92	10.81	0.00	10.81	59.46	100.00
LOUISIANA	20.43	8.60	0.00	38.71	32.26	100.00
MAINE	47.62	42.86	0.00	9.52	0.00	100.00
MARYLAND	36.36	31.82	0.00	31.82	0.00	100.00
MASSACHUSETTS	0.00	33.33	33.33	33.33	0.00	100.00
MICHIGAN	-	-	-	-	-	-
MINNESOTA	100.00	0.00	0.00	0.00	0.00	100.00
MISSISSIPPI	-	-	-	-	-	-
MISSOURI	70.59	0.00	0.00	0.00	29.41	100.00
MONTANA	35.71	0.00	21.43	0.00	42.86	100.00
NEBRASKA	-	-	-	-	-	-
NEVADA	-	-	-	-	-	-
NEW HAMPSHIRE	54.55	0.00	0.00	0.00	45.45	100.00
NEW JERSEY	98.39	0.00	1.61	0.00	0.00	100.00
NEW MEXICO	44.44	22.22	0.00	0.00	33.33	100.00
NEW YORK	-	39.86	19.93	10.20	30.01	100.00
NORTH CAROLINA	40.26	22.08	9.09	11.69	16.88	100.00
NORTH DAKOTA	75.00	0.00	0.00	0.00	25.00	100.00
OHIO	-	-	-	-	-	-
OKLAHOMA	100.00	0.00	0.00	0.00	0.00	100.00
OREGON	55.36	16.07	3.57	14.29	10.71	100.00
PENNSYLVANIA	-	-	-	-	-	-
PUERTO RICO	11.43	0.00	0.00	11.43	77.14	100.00
RHODE ISLAND	5.29	0.00	0.00	3.37	91.35	100.00
SOUTH CAROLINA	0.00	50.00	50.00	0.00	0.00	100.00
SOUTH DAKOTA	0.00	100.00	0.00	0.00	0.00	100.00
TENNESSEE	-	-	-	-	-	100.00
TEXAS	59.54	40.46	0.00	0.00	0.00	100.00
UTAH	100.00	0.00	0.00	0.00	0.00	100.00
VERMONT	-	-	-	-	100.00	100.00
VIRGINIA	38.10	28.57	4.76	19.05	9.52	100.00
WASHINGTON	16.67	33.33	0.00	16.67	33.33	100.00
WEST VIRGINIA	36.96	0.00	0.00	47.83	15.22	100.00
WISCONSIN	86.96	0.00	0.00	0.00	13.04	100.00
WYOMING	83.33	0.00	0.00	16.67	0.00	100.00
AMERICAN SAMOA	-	-	-	-	-	-
GUAM	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	100.00	0.00	0.00	0.00	0.00	100.00
U.S. & INSULAR AREAS	23.17	15.78	6.25	12.62	25.81	100.00
50 STATES, D.C. & P.R.	23.13	15.79	6.25	12.63	25.82	100.00

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE PROPORTIONS FOR THE U.S. AND INSULAR AREAS AND THE 50 STATES, D.C. AND PUERTO RICO WILL NOT SUM TO 100 PERCENT.

DATA AS OF OCTOBER 1, 1986.

Table EE1

NUMBER OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

VISUALLY HANDICAPPED

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	41	8	1	3	3	56
ALASKA	2	0	0	1	0	3
ARIZONA	9	5	1	1	4	20
ARKANSAS	17	1	0	4	4	26
CALIFORNIA	60	0	46	32	30	168
COLORADO	16	0	0	5	8	29
CONNECTICUT	4	0	0	1	0	5
DELAWARE	8	2	8	0	1	19
DISTRICT OF COLUMBIA	0	0	0	0	0	0
FLORIDA	33	0	0	27	26	86
GEORGIA	0	1	0	1	0	2
HAWAII	3	1	1	0	0	5
IDAHO	3	1	0	0	1	5
ILLINOIS	0	0	0	0	25	25
INDIANA	28	8	0	3	1	40
IOWA	9	0	0	1	0	10
KANSAS	7	4	0	0	2	13
KENTUCKY	14	2	1	2	1	20
LOUISIANA	7	9	1	3	3	23
MAINE	2	2	1	8	0	13
MARYLAND	0	34	0	6	0	40
MASSACHUSETTS	0	3	3	2	0	8
MICHIGAN	41	3	0	0	0	44
MINNESOTA	24	0	0	0	0	24
MISSISSIPPI	4	1	0	0	3	8
MISSOURI	37	33	0	10	0	80
MONTANA	5	1	0	1	1	8
NEBRASKA	8	0	1	0	0	9
NEVADA	1	0	0	0	0	1
NEW HAMPSHIRE	7	0	0	0	0	7
NEW JERSEY	3	0	0	0	0	3
NEW MEXICO	2	0	0	2	0	4
NEW YORK	-	34	25	17	8	84
NORTH CAROLINA	30	7	0	4	5	46
NORTH DAKOTA	10	0	0	0	1	11
OHIO	45	0	0	30	0	75
OKLAHOMA	6	0	0	0	0	6
OREGON	2	2	0	2	1	7
PENNSYLVANIA	100	2	1	15	5	123
PUERTO RICO	4	0	8	4	12	28
RHODE ISLAND	0	2	4	0	5	11
SOUTH CAROLINA	14	0	1	2	5	22
SOUTH DAKOTA	0	7	0	0	0	7
TENNESSEE	-	-	-	-	-	21
TEXAS	32	40	0	0	0	72
UTAH	6	0	0	0	0	6
VERMONT	-	-	-	-	-	-
VIRGINIA	24	9	1	3	3	40
WASHINGTON	15	0	0	0	0	15
WEST VIRGINIA	9	0	0	2	0	11
WISCONSIN	13	0	0	0	0	13
WYOMING	2	0	0	0	1	3
AMERICAN SAMOA	0	0	0	0	0	0
GUAM	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	0	0	2	0	2
U.S. & INSULAR AREAS	707	222	104	194	159	1,407
50 STATES, D.C. & P.R.	707	222	104	192	159	1,405

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE U.S. AND INSULAR AREAS AND 50 STATES, D.C. AND PUERTO RICO TOTALS WILL NOT SUM TO THE TOTALS SHOWN.

DATA AS OF OCTOBER 1, 1986.

Table EE1

PROPORTION OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM
DURING THE 1984-85 SCHOOL YEAR
BY REASON FOR EXIT

VISUALLY HANDICAPPED

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	73.21	14.29	1.79	5.36	5.36	100.00
ALASKA	66.67	0.00	0.00	33.33	0.00	100.00
ARIZONA	45.00	25.00	5.00	5.00	20.00	100.00
ARKANSAS	65.38	3.85	0.00	15.38	15.38	100.00
CALIFORNIA	35.71	0.00	27.38	19.05	17.86	100.00
COLORADO	55.17	0.00	0.00	17.24	27.59	100.00
CONNECTICUT	80.00	0.00	0.00	20.00	0.00	100.00
DELAWARE	42.11	10.53	42.11	0.00	5.26	100.00
DISTRICT OF COLUMBIA	-	-	-	-	-	-
FLORIDA	38.37	0.00	0.00	31.40	30.23	100.00
GEORGIA	0.00	50.00	0.00	50.00	0.00	100.00
HAWAII	60.00	20.00	20.00	0.00	0.00	100.00
IDAHO	60.00	20.00	0.00	0.00	20.00	100.00
ILLINOIS	0.00	0.00	0.00	0.00	100.00	100.00
INDIANA	70.00	20.00	0.00	7.50	2.50	100.00
IOWA	90.00	0.00	0.00	10.00	0.00	100.00
KANSAS	53.85	30.77	0.00	0.00	15.38	100.00
KENTUCKY	70.00	10.00	5.00	10.00	5.00	100.00
LOUISIANA	30.43	39.13	4.35	13.04	13.04	100.00
MAINE	15.38	15.38	7.69	61.54	0.00	100.00
MARYLAND	0.00	85.00	0.00	15.00	0.00	100.00
MASSACHUSETTS	0.00	37.50	37.50	25.00	0.00	100.00
MICHIGAN	93.18	6.82	0.00	0.00	0.00	100.00
MINNESOTA	100.00	0.00	0.00	0.00	0.00	100.00
MISSISSIPPI	50.00	12.50	0.00	0.00	37.50	100.00
MISSOURI	46.25	41.25	0.00	12.50	0.00	100.00
MONTANA	62.50	12.50	0.00	12.50	12.50	100.00
NEBRASKA	88.89	0.00	11.11	0.00	0.00	100.00
NEVADA	100.00	0.00	0.00	0.00	0.00	100.00
NEW HAMPSHIRE	100.00	0.00	0.00	0.00	0.00	100.00
NEW JERSEY	100.00	0.00	0.00	0.00	0.00	100.00
NEW MEXICO	50.00	0.00	0.00	50.00	0.00	100.00
NEW YORK	-	40.48	29.76	20.24	9.52	100.00
NORTH CAROLINA	65.22	15.22	0.00	8.70	10.87	100.00
NORTH DAKOTA	90.91	0.00	0.00	0.00	9.09	100.00
OHIO	60.00	0.00	0.00	40.00	0.00	100.00
OKLAHOMA	100.00	0.00	0.00	0.00	0.00	100.00
OREGON	28.57	28.57	0.00	28.57	14.29	100.00
PENNSYLVANIA	81.30	1.63	0.81	12.20	4.07	100.00
PUERTO RICO	14.29	0.00	28.57	14.29	42.86	100.00
RHODE ISLAND	0.00	18.18	36.36	0.00	45.45	100.00
SOUTH CAROLINA	63.64	0.00	4.55	9.09	22.73	100.00
SOUTH DAKOTA	0.00	100.00	0.00	0.00	0.00	100.00
TENNESSEE	-	-	-	-	-	100.00
TEXAS	44.44	55.56	0.00	0.00	0.00	100.00
UTAH	100.00	0.00	0.00	0.00	0.00	100.00
VERMONT	-	-	-	-	-	-
VIRGINIA	60.00	22.50	2.50	7.50	7.50	100.00
WASHINGTON	100.00	0.00	0.00	0.00	0.00	100.00
WEST VIRGINIA	81.82	0.00	0.00	18.18	0.00	100.00
WISCONSIN	100.00	0.00	0.00	0.00	0.00	100.00
WYOMING	66.67	0.00	0.00	0.00	33.33	100.00
AMERICAN SAMOA	-	-	-	-	-	-
GUAM	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0.00	0.00	0.00	100.00	0.00	100.00
U.S. & INSULAR AREAS	50.25	15.78	7.39	13.79	11.30	100.00
50 STATES, D.C. & P.R.	50.32	15.80	7.40	13.67	11.32	100.00

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE PROPORTIONS FOR THE U.S. AND INSULAR AREAS AND THE 50 STATES, D.C. AND PUERTO RICO WILL NOT SUM TO 100 PERCENT.

DATA AS OF OCTOBER 1, 1986.

Table EE1

NUMBER OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY REASON FOR EXIT

DEAF-BLIND

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	0	0	0	0	0	0
ALASKA	0	0	0	0	0	0
ARIZONA	0	0	0	0	0	0
ARKANSAS	0	0	0	0	0	0
CALIFORNIA	0	0	9	0	0	9
COLORADO	0	0	7	0	1	8
CONNECTICUT	1	2	0	0	0	3
DELAWARE	0	0	3	0	0	3
DISTRICT OF COLUMBIA	0	0	2	0	0	2
FLORIDA	0	0	0	0	0	0
GEORGIA	18	8	0	4	6	36
HAWAII	0	0	0	0	1	1
IDAHO	0	0	0	0	0	0
ILLINOIS	0	0	0	0	0	0
INDIANA	0	0	0	0	0	0
IOWA	0	3	2	0	2	7
KANSAS	0	0	2	0	0	2
KENTUCKY	0	1	0	0	0	1
LOUISIANA	0	0	0	0	1	1
MAINE	0	0	0	0	0	0
MARYLAND	0	3	0	0	0	3
MASSACHUSETTS	0	0	1	0	0	1
MICHIGAN	0	0	0	0	0	0
MINNESOTA	2	0	0	0	0	2
MISSISSIPPI	0	0	0	0	0	0
MISSOURI	0	0	0	0	0	0
MONTANA	0	0	0	0	0	0
NEBRASKA	-	-	-	-	-	-
NEVADA	-	-	-	-	-	-
NEW HAMPSHIRE	1	0	0	0	0	1
NEW JERSEY	0	0	0	0	0	0
NEW MEXICO	-	-	-	-	-	-
NEW YORK	-	4	9	5	1	19
NORTH CAROLINA	1	2	0	0	0	3
NORTH DAKOTA	0	0	1	0	0	1
OHIO	-	-	-	-	-	-
OKLAHOMA	1	0	0	0	0	1
OREGON	4	1	0	0	2	7
PENNSYLVANIA	0	2	2	0	0	4
PUERTO RICO	4	0	0	0	4	8
RHODE ISLAND	0	2	0	0	0	2
SOUTH CAROLINA	0	0	0	0	0	0
SOUTH DAKOTA	0	6	0	0	0	6
TENNESSEE	-	-	-	-	-	1
TEXAS	2	5	0	0	0	7
UTAH	0	3	0	0	0	3
VERMONT	0	0	0	0	0	0
VIRGINIA	0	0	2	1	0	3
WASHINGTON	-	-	-	-	-	-
WEST VIRGINIA	9	0	0	17	0	26
WISCONSIN	0	1	0	0	0	1
WYOMING	0	0	1	0	0	1
AMERICAN SAMOA	0	0	0	1	0	1
GUAM	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	0	0	0	0	0
U.S. & INSULAR AREAS	43	43	41	28	18	174
50 STATES, D.C. & P.R.	43	43	41	27	18	173

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE U.S. AND INSULAR AREAS AND 50 STATES, D.C. AND PUERTO RICO TOTALS WILL NOT SUM TO THE TOTALS SHOWN.

DATA AS OF OCTOBER 1, 1986.

Table EE1

PROPORTION OF STUDENTS 16 YEARS AND OLDER EXITING THE EDUCATIONAL SYSTEM
DURING THE 1984-85 SCHOOL YEAR
BY REASON FOR EXIT

DEAF-BLIND

STATE	GRADUATION WITH DIPLOMA	GRADUATION THROUGH CERTIFICATION	REACHED MAXIMUM AGE	DROPPED OUT	OTHER	TOTAL
ALABAMA	-	-	-	-	-	-
ALASKA	-	-	-	-	-	-
ARIZONA	-	-	-	-	-	-
ARKANSAS	-	-	-	-	-	-
CALIFORNIA	0.00	0.00	100.00	0.00	0.00	100.00
COLORADO	0.00	0.00	87.50	0.00	12.50	100.00
CONNECTICUT	33.33	66.67	0.00	0.00	0.00	100.00
DELAWARE	0.00	0.00	100.00	0.00	0.00	100.00
DISTRICT OF COLUMBIA	0.00	0.00	100.00	0.00	0.00	100.00
FLORIDA	-	-	-	-	-	-
GEORGIA	50.00	22.22	0.00	11.11	16.67	100.00
HAWAII	0.00	0.00	0.00	0.00	100.00	100.00
IDAHO	-	-	-	-	-	-
ILLINOIS	-	-	-	-	-	-
INDIANA	-	-	-	-	-	-
IOWA	0.00	42.86	28.57	0.00	28.57	100.00
KANSAS	0.00	0.60	100.00	0.00	0.00	100.00
KENTUCKY	0.00	100.00	0.00	0.00	0.00	100.00
LOUISIANA	0.00	0.00	0.00	0.00	100.00	100.00
MAINE	-	-	-	-	-	-
MARYLAND	0.00	100.00	0.00	0.00	0.00	100.00
MASSACHUSETTS	0.00	0.00	100.00	0.00	0.00	100.00
MICHIGAN	-	-	-	-	-	-
MINNESOTA	100.00	0.00	0.00	0.00	0.00	100.00
MISSISSIPPI	-	-	-	-	-	-
MISSOURI	-	-	-	-	-	-
MONTANA	-	-	-	-	-	-
NEBRASKA	-	-	-	-	-	-
NEVADA	-	-	-	-	-	-
NEW HAMPSHIRE	100.00	0.00	0.00	0.00	0.00	100.00
NEW JERSEY	-	-	-	-	-	-
NEW MEXICO	-	-	-	-	-	-
NEW YORK	-	21.05	47.37	26.32	5.26	100.00
NORTH CAROLINA	33.33	66.67	0.00	0.00	0.00	100.00
NORTH DAKOTA	0.00	0.00	100.00	0.00	0.00	100.00
OHIO	-	-	-	-	-	-
OKLAHOMA	100.00	0.00	0.00	0.00	0.00	100.00
OREGON	57.14	14.29	0.00	0.00	28.57	100.00
PENNSYLVANIA	0.00	50.00	50.00	0.00	0.00	100.00
PUERTO RICO	50.00	0.00	0.00	0.00	50.00	100.00
RHODE ISLAND	0.00	100.00	0.00	0.00	0.00	100.00
SOUTH CAROLINA	-	-	-	-	-	-
SOUTH DAKOTA	0.00	100.00	0.00	0.00	0.00	100.00
TENNESSEE	-	-	-	-	-	100.00
TEXAS	28.57	71.43	0.00	0.00	0.00	100.00
UTAH	0.00	100.00	0.00	0.00	0.00	100.00
VERMONT	-	-	-	-	-	-
VIRGINIA	0.00	0.00	66.67	33.33	0.00	100.00
WASHINGTON	-	-	-	-	-	-
WEST VIRGINIA	34.62	0.00	0.00	65.38	0.00	100.00
WISCONSIN	0.00	100.00	0.00	0.00	0.00	100.00
WYOMING	0.00	0.00	100.00	0.00	0.00	100.00
AMERICAN SAMOA	0.00	0.00	0.00	100.00	0.00	100.00
GUAM	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	-	-	-	-	-	-
U.S. & INSULAR AREAS	24.71	24.71	23.56	16.09	10.34	100.00
50 STATES, D.C. & P.R.	24.86	24.86	23.70	15.61	10.40	100.00

SOME STATES REPORTED ONLY TOTAL STUDENTS EXITING THE EDUCATIONAL SYSTEM AND DID NOT REPORT DATA BY REASON FOR EXIT. AS A RESULT, THE PROPORTIONS FOR THE U.S. AND INSULAR AREAS AND THE 50 STATES, D.C. AND PUERTO RICO WILL NOT SUM TO 100 PERCENT.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

ALL CONDITIONS

STATE	COUNSELING/ GUIDANCE	TRANS- PORTATION	TECHNO- LOGICAL AIDES	INTER- PRETER SERVICES	READER SERVICES	PHYSICAL/ MENTAL RESTOR- ATION	FAMILY SERVICES	INDEP- ENDENT LIVING	MAINT- ENANCE	RESID- ENTIAL SERVICES	VOCATIONAL/ TRAINING SERVICES
ALABAMA	3,144	785	94	21	64	533	1,350	332	528	112	2,980
ALASKA	136	32	10	2	2	5	13	28	34	18	152
ARIZONA	795	212	96	46	22	117	223	175	192	69	937
ARKANSAS	249	46	25	19	3	35	40	65	66	16	597
CALIFORNIA	6,910	750	1,776	244	84	-	1,137	1,551	9	370	5,383
COLORADO	291	143	65	33	6	67	334	216	529	64	542
CONNECTICUT	1,801	101	18	6	1	338	200	63	188	56	734
DELAWARE	352	73	5	7	2	25	80	83	105	55	350
DISTRICT OF COLUMBIA	0	41	2	0	0	5	53	56	36	0	75
FLORIDA	2,168	842	96	50	62	618	963	599	636	259	1,778
GEORGIA	1,184	390	66	26	59	153	400	284	393	93	1,414
HAWAII	0	150	484	67	179	164	162	453	100	19	555
IDAHO	308	74	16	12	10	52	94	109	85	62	378
ILLINOIS	-	-	-	-	-	-	-	-	-	-	-
INDIANA	1,587	678	126	34	64	206	499	490	394	370	2,153
IOWA	829	913	49	30	136	552	500	195	322	154	1,178
KANSAS	904	272	17	30	14	457	239	330	265	192	1,294
KENTUCKY	1,004	403	702	18	39	628	1,060	760	737	132	1,941
LOUISIANA	1,767	614	188	127	85	239	546	611	407	300	1,869
MAINE	1,710	0	0	0	0	129	1,718	507	380	0	904
MARYLAND	2,347	667	530	60	228	632	2,016	862	1,043	399	3,221
MASSACHUSETTS	1,441	282	402	21	9	234	1,272	1,272	127	56	1,200
MICHIGAN	3,207	714	82	7	0	0	361	54	134	462	4,412
MINNESOTA	3,090	30	-	45	26	74	582	385	134	-	3,157
MISSISSIPPI	711	270	24	17	10	99	184	188	318	45	1,057
MISSOURI	1,226	1,330	30	185	20	164	190	165	556	96	2,236
MONTANA	233	41	31	5	4	13	49	54	90	26	230
NEBRASKA	829	641	53	53	6	141	442	578	428	245	893
NEVADA	64	17	6	10	2	5	24	26	13	5	106
NEW HAMPSHIRE	-	-	-	-	-	-	-	-	-	-	-
NEW JERSEY	1,831	252	41	13	2	238	1,219	648	181	537	1,527
NEW MEXICO	486	161	15	11	8	63	134	171	109	45	698
NEW YORK	4,891	1,155	2,068	224	1,229	1,703	4,707	5,184	1,927	1,913	5,973
NORTH CAROLINA	1,915	584	179	152	65	198	493	590	522	224	2,714
NORTH DAKOTA	166	79	24	6	35	10	52	97	51	46	252
OHIO	2,997	284	335	140	15	571	909	507	1,014	234	2,577
OKLAHOMA	884	164	50	19	3	107	220	46	432	12	2,798
OREGON	212	13	0	6	1	0	85	90	28	10	308
PENNSYLVANIA	4,162	1,097	572	87	300	800	3,028	788	746	800	4,966
PUERTO RICO	1,444	1,444	0	0	0	1,444	1,444	1,444	1,444	0	1,444
RHODE ISLAND	252	85	61	22	32	33	174	230	206	87	271
SOUTH CAROLINA	1,770	552	358	62	24	488	343	574	353	146	2,064
SOUTH DAKOTA	346	102	71	11	4	49	49	62	93	113	439
TENNESSEE	-	-	-	-	-	-	-	-	-	-	-
TEXAS	1,343	757	611	289	81	1,311	667	640	602	591	1,026
UTAH	822	218	65	24	17	119	191	206	131	113	779
VERMONT	0	0	0	0	0	0	0	0	1	1	5
VIRGINIA	813	1,062	5	36	7	285	297	1,550	1,505	395	1,766
WASHINGTON	793	90	45	15	15	90	180	135	135	315	1,487
WEST VIRGINIA	783	243	31	20	8	56	216	187	201	45	1,018
WISCONSIN	1,000	159	45	9	13	-	139	137	656	502	908
WYOMING	102	6	6	2	6	4	9	19	14	15	121
AMERICAN SAMOA	10	1	0	0	0	0	1	1	1	0	10
GUAM	3	4	0	4	6	0	0	3	9	0	14
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	121	3	0	0	0	15	89	104	74	7	119
U.S. & INSULAR AREAS	66,059	19,724	10,175	2,356	3,110	13,349	29,402	23,904	18,676	9,826	74,930
50 STATES, D.C. & P.R.	65,925	19,716	10,175	2,352	3,110	13,334	29,312	23,798	18,592	9,819	74,787

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

ALL CONDITIONS

STATE	TRANSITIONAL EMPLOYMENT SERVICES	VOCATIONAL PLACEMENT	POST EMPLOY- MENT	EVALUATION OF VR SERVICES	OTHER SERVICES	ALL SERVICES	NO SPECIAL SERVICES
ALABAMA	1,199	2,502	999	2,167	130	16,948	1,302
ALASKA	86	147	62	178	9	914	202
ARIZONA	468	814	263	660	55	5,144	435
ARKANSAS	115	415	127	147	59	2,024	359
CALIFORNIA	3,556	3,684	-	-	-	25,462	4,059
COLORADO	532	520	520	0	0	3,862	231
CONNECTICUT	275	517	68	858	0	5,233	0
DELAWARE	261	271	173	289	7	2,148	121
DISTRICT OF COLUMBIA	2	42	8	63	17	400	11
FLORIDA	1,046	1,630	894	1,879	255	13,775	309
GEORGIA	688	1,287	559	1,439	327	8,762	1,736
HAWAII	555	513	517	555	0	4,473	0
IDAHO	206	302	156	331	47	2,242	158
ILLINOIS	-	-	-	-	-	7,074	-
INDIANA	897	1,887	727	1,696	136	11,744	819
IOWA	968	1,062	965	434	24	8,311	753
KANSAS	615	761	431	886	88	6,885	323
KENTUCKY	1,201	1,773	1,245	1,483	503	14,319	401
LOUISIANA	287	1,350	606	815	295	10,100	795
MAINE	1,796	943	783	1,154	302	10,334	0
MARYLAND	2,391	2,666	2,418	1,528	0	21,008	501
MASSACHUSETTS	135	1,200	135	1,200	0	8,986	0
MICHIGAN	898	814	684	4,271	0	16,100	2,302
MINNESOTA	3,201	760	3,125	760	-	15,309	-
MISSISSIPPI	450	797	319	992	76	5,557	502
MISSOURI	1,223	1,935	651	1,773	61	11,849	1,140
MONTANA	180	204	76	168	56	1,460	166
NEBRASKA	938	947	246	760	12	7,212	0
NEVADA	66	135	11	76	4	570	74
NEW HAMPSHIRE	-	-	-	-	-	-	-
NEW JERSEY	1,527	1,527	1,527	1,476	0	12,546	1,561
NEW MEXICO	212	354	177	346	32	3,022	416
NEW YORK	19	8,914	607	6,188	0	47,302	5,250
NORTH CAROLINA	923	2,306	925	1,962	86	13,860	1,074
NORTH DAKOTA	127	159	79	190	49	1,422	46
OHIO	963	3,624	748	2,098	459	17,464	1,919
OKLAHOMA	2,251	1,123	324	1,497	479	10,329	840
OREGON	68	250	4	97	0	1,173	603
PENNSYLVANIA	2,062	4,915	799	4,704	33	31,227	2,719
PUERTO RICO	1,444	1,444	1,444	1,444	0	15,884	0
RHODE ISLAND	184	182	0	150	22	1,991	27
SOUTH CAROLINA	610	1,478	504	1,690	26	11,062	602
SOUTH DAKOTA	471	679	560	434	4	3,487	72
TENNESSEE	-	-	-	-	-	-	-
TEXAS	1,195	1,030	676	867	-	11,606	-
UTAH	292	557	193	357	21	4,105	67
VERMONT	0	0	21	0	20	48	35
VIRGINIA	1,256	1,535	2,092	1,188	0	13,812	0
WASHINGTON	583	1,451	314	752	0	6,320	1,420
WEST VIRGINIA	561	793	453	963	62	5,640	454
WISCONSIN	827	917	-	875	-	6,187	550
WYOMING	58	85	34	70	9	560	171
AMERICAN SAMOA	10	10	0	10	0	54	0
GUAM	30	7	39	66	0	179	0
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	57	119	53	117	25	903	72
U.S. & INSULAR AREAS	40,565	63,148	28,341	54,103	3,790	468,532	34,757
50 STATES, D.C. & P.R.	40,468	63,012	28,249	53,910	3,765	467,396	34,685

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

LEARNING DISABLED

STATE	COUNSELING/ GUIDANCE	TRANS- PORTATION	TECHNO- LOGICAL AIDES	INTER- PRETER SERVICES	READER SERVICES	PHYSICAL/ MENTAL RESTOR- ATION	FAMILY SERVICES	INDEP- ENDENT LIVING	MAINT- ENANCE	RESID- ENTIAL SERVICES	VOCATIONAL/ TRAINING SERVICES
ALABAMA	489	54	18	0	32	8	20	17	33	0	580
ALASKA	81	13	0	0	0	0	1	8	10	2	105
ARIZONA	442	66	20	2	5	38	72	29	15	6	534
ARKANSAS	213	36	5	0	0	30	32	30	38	1	539
CALIFORNIA	3,621	-	-	-	-	-	-	-	-	-	3,169
COLORADO	27	5	2	0	0	4	126	0	126	0	60
CONNECTICUT	200	33	13	0	0	36	46	28	22	2	143
DELAWARE	100	0	0	0	0	0	7	13	8	0	85
DISTRICT OF COLUMBIA	0	0	0	0	0	0	0	0	0	0	7
FLORIDA	454	13	0	0	0	26	13	13	7	0	285
GEORGIA	358	56	12	0	10	6	27	20	24	6	372
HAWAII	0	0	288	0	57	0	57	288	0	0	288
IDAHO	156	10	0	1	0	12	30	27	13	3	176
ILLINOIS	-	-	-	-	-	-	-	-	-	-	-
INDIANA	494	50	16	0	17	38	89	38	54	4	551
IOWA	546	20	0	0	118	156	149	18	63	0	281
KANSAS	166	19	2	0	4	4	25	90	43	1	433
KENTUCKY	399	42	539	0	24	371	371	391	89	0	651
LOUISIANA	725	198	6	1	20	18	100	235	98	9	869
MAINE	391	0	-	-	-	19	391	116	88	-	207
MARYLAND	1,003	126	126	0	175	125	877	250	126	0	2,003
MASSACHUSETTS	509	100	142	0	0	0	458	458	47	20	424
MICHIGAN	1,885	0	0	0	0	0	0	0	0	0	1,885
MINNESOTA	2,395	-	-	-	-	-	-	-	-	-	2,395
MISSISSIPPI	213	69	1	0	0	20	44	34	59	4	375
MISSOURI	204	37	0	0	5	19	46	5	20	28	807
MONTANA	106	5	0	1	0	1	10	7	10	3	87
NEBRASKA	577	358	0	0	0	75	240	314	214	51	578
NEVADA	27	2	-	-	2	-	6	11	-	-	51
NEW HAMPSHIRE	-	-	-	-	-	-	-	-	-	-	-
NEW JERSEY	396	0	0	0	0	0	198	0	0	0	792
NEW MEXICO	194	53	0	3	3	13	54	66	32	6	436
NEW YORK	3,401	0	1,352	0	684	0	0	0	0	0	2,049
NORTH CAROLINA	801	73	6	25	15	56	68	105	90	42	970
NORTH DAKOTA	66	9	0	0	23	0	9	15	6	4	101
OHIO	1,146	57	177	0	0	175	572	322	146	191	1,029
OKLAHOMA	450	0	0	0	0	0	0	0	0	0	1,760
OREGON	131	0	0	0	0	0	48	58	14	0	267
PENNSYLVANIA	2,068	283	291	0	103	273	1,056	94	5	257	1,799
PUERTO RICO	157	157	0	0	0	157	157	157	157	0	157
RHODE ISLAND	78	8	0	0	0	3	40	69	47	0	78
SOUTH CAROLINA	446	102	35	0	14	26	45	15	21	3	431
SOUTH DAKOTA	8	22	0	0	0	0	5	3	29	7	43
TENNESSEE	-	-	-	-	-	-	-	-	-	-	-
TEXAS	600	-	-	-	-	-	-	-	-	-	-
UTAH	180	3	0	0	1	38	25	36	13	1	169
VERMONT	-	-	-	-	-	-	-	-	-	-	1
VIRGINIA	252	8	0	0	0	30	25	39	12	0	197
WASHINGTON	418	30	-	-	-	75	60	90	45	30	867
WEST VIRGINIA	295	30	0	0	0	2	52	12	28	7	384
WISCONSIN	-	-	-	-	-	-	-	-	-	-	-
WYOMING	45	1	0	0	4	3	5	4	2	0	72
AMERICAN SAMOA	0	0	0	0	0	0	0	0	0	0	0
GUAM	0	0	0	0	0	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	37	0	0	0	0	0	20	26	37	0	37
U.S. & INSULAR AREAS	27,108	2,148	3,051	33	1,316	1,857	5,676	3,551	1,891	688	29,519
50 STATES, D.C. & P.R.	27,071	2,148	3,051	33	1,316	1,857	5,656	3,525	1,854	688	29,482

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

LEARNING DISABLED

STATE	TRANSITIONAL EMPLOYMENT SERVICES	VOCATIONAL PLACEMENT	POST EMPLOY-MENT	EVALUATION OF VR SERVICES	OTHER SERVICES	ALL SERVICES	NO SPECIAL SERVICES
ALABAMA	158	511	89	453	63	2,525	233
ALASKA	39	101	39	127	8	534	182
ARIZONA	191	450	98	323	8	2,299	320
ARKANSAS	104	368	117	125	18	1,656	315
CALIFORNIA	905	1,132	-	-	-	8,827	3,044
COLORADO	60	60	60	0	0	530	18
CONNECTICUT	68	88	3	204	0	974	0
DELAWARE	115	97	57	86	0	576	71
DISTRICT OF COLUMBIA	1	36	1	1	8	54	5
FLORIDA	59	85	46	298	0	1,299	112
GEORGIA	102	336	184	374	240	2,127	1,138
HAWAII	288	288	288	288	0	2,130	0
IDAHO	70	137	82	148	24	889	132
ILLINOIS	-	-	-	-	-	1,214	-
INDIANA	244	479	268	406	42	2,790	370
IOWA	240	282	242	0	1	2,116	448
KANSAS	212	264	148	195	22	1,628	120
KENTUCKY	270	640	544	474	221	5,034	130
LOUISIANA	99	638	310	251	40	3,557	520
MAINE	414	207	234	264	68	2,399	-
MARYLAND	1,253	1,253	1,128	376	0	8,821	501
MASSACHUSETTS	48	424	48	424	0	3,102	0
MICHIGAN	0	0	0	1,885	0	5,655	1,885
MINNESOTA	2,395	-	2,395	-	-	9,580	-
MISSISSIPPI	140	235	98	313	31	1,636	311
MISSOURI	89	232	149	233	19	1,893	659
MONTANA	73	83	14	50	21	471	147
NEBRASKA	548	646	112	496	0	4,209	0
NEVADA	35	72	4	40	-	250	67
NEW HAMPSHIRE	-	-	-	-	-	-	-
NEW JERSEY	792	792	792	396	0	4,158	1,193
NEW MEXICO	65	184	77	160	20	1,366	322
NEW YORK	0	4,098	0	2,745	0	14,329	4,098
NORTH CAROLINA	227	917	375	605	12	4,387	758
NORTH DAKOTA	31	56	40	62	23	445	26
OHIO	527	1,278	351	1,101	204	7,276	1,013
OKLAHOMA	1,310	500	250	450	240	4,960	700
OREGON	40	221	0	54	0	841	437
PENNSYLVANIA	770	1,971	118	2,038	0	11,132	1,568
PUERTO RICO	157	157	157	157	0	1,727	0
RHODE ISLAND	59	40	0	44	0	466	21
SOUTH CAROLINA	101	456	104	311	0	2,112	263
SOUTH DAKOTA	122	293	251	83	0	866	72
TENNESSEE	-	-	-	-	-	-	-
TEXAS	600	-	-	-	-	1,260	-
UTAH	43	179	39	67	15	809	37
VERMONT	-	-	12	-	9	22	15
VIRGINIA	85	215	188	216	0	1,267	0
WASHINGTON	373	1,046	179	477	0	3,690	1,285
WEST VIRGINIA	237	350	195	367	10	1,969	295
WISCONSIN	11	55	-	-	-	66	481
WYOMING	26	53	18	37	3	273	103
AMERICAN SAMOA	0	0	0	0	0	0	0
GUAM	23	0	0	0	0	23	0
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	37	0	37	17	248	70
U.S. & INSULAR AREAS	13,841	22,042	9,904	17,241	1,387	142,467	23,485
50 STATES, D.C. & P.R.	13,818	22,005	9,904	17,204	1,370	142,196	23,415

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

SPEECH IMPAIRED

STATE	COUNSELING/ GUIDANCE	TRANSPORTATION	TECHNOLOGICAL AIDES	INTERPRETER SERVICES	READER SERVICES	PHYSICAL/ MENTAL RESTORATION	FAMILY SERVICES	INDEPENDENT LIVING	MAINTENANCE	RESIDENTIAL SERVICES	VOCATIONAL/ TRAINING SERVICES
ALABAMA	15	0	0	2	0	0	0	1	2	0	40
ALASKA	3	0	0	0	0	0	0	1	1	0	3
ARIZONA	22	4	0	0	0	0	0	4	0	1	17
ARKANSAS	3	0	0	0	0	1	0	0	1	0	7
CALIFORNIA	300	-	-	-	-	-	-	-	-	-	-
COLORADO	3	1	0	0	0	1	0	0	0	0	10
CONNECTICUT	12	0	0	0	0	0	0	0	0	0	0
DELAWARE	0	0	0	0	0	1	0	1	0	0	0
DISTRICT OF COLUMBIA	0	0	0	0	0	0	0	0	0	0	1
FLORIDA	73	40	20	7	0	112	40	20	40	0	88
GEORGIA	2	6	2	0	0	0	0	6	6	2	8
HAWAII	0	0	12	0	0	0	0	12	0	0	12
IDAHO	5	0	0	0	0	4	0	0	0	0	11
ILLINOIS	-	-	-	-	-	-	-	-	-	-	-
INDIANA	51	14	2	2	0	2	3	7	4	8	45
IOWA	0	0	0	0	0	0	0	0	0	0	0
KANSAS	13	2	0	0	1	0	1	2	7	7	24
KENTUCKY	13	3	5	0	0	3	2	3	0	0	18
LOUISIANA	9	1	1	0	1	2	4	2	2	1	9
MAINE	261	0	-	-	-	34	261	77	59	-	138
MARYLAND	237	0	17	0	0	17	95	0	17	0	127
MASSACHUSETTS	330	65	94	0	0	0	297	297	31	13	276
MICHIGAN	0	0	0	0	0	0	0	0	0	0	38
MINNESOTA	-	-	-	-	-	-	-	-	90	-	-
MISSISSIPPI	23	8	1	1	0	8	6	4	4	0	21
MISSOURI	0	0	0	0	0	5	0	0	0	0	0
MONTANA	7	1	0	0	0	0	2	3	0	0	6
NEBRASKA	0	34	10	0	0	0	19	18	11	10	32
NEVADA	-	-	-	-	-	-	-	-	-	-	-
NEW HAMPSHIRE	-	-	-	-	-	-	-	-	-	-	-
NEW JERSEY	15	0	0	0	0	0	11	0	0	0	15
NEW MEXICO	42	13	0	0	0	3	14	7	9	2	48
NEW YORK	0	0	125	0	0	0	0	0	0	0	255
NORTH CAROLINA	18	6	2	0	6	0	9	4	6	4	24
NORTH DAKOTA	4	0	0	0	0	0	0	0	1	0	4
OHIO	0	0	0	0	0	0	0	0	0	0	15
OKLAHOMA	0	0	0	0	0	0	0	0	0	6	0
OREGON	5	0	0	0	0	0	1	0	0	0	0
PENNSYLVANIA	147	25	1	1	24	0	113	0	0	3	116
PUERTO RICO	20	20	0	0	0	20	20	20	20	0	20
RHODE ISLAND	10	0	0	0	0	0	11	25	38	0	13
SOUTH CAROLINA	37	63	16	0	0	13	3	15	10	0	40
SOUTH DAKOTA	4	0	0	0	0	0	0	0	0	0	10
TENNESSEE	-	-	-	-	-	-	-	-	-	-	-
TEXAS	-	-	46	-	-	12	-	-	-	-	-
UTAH	12	0	0	0	0	1	1	6	1	0	1
VERMONT	-	-	-	-	-	-	-	-	-	-	-
VIRGINIA	9	0	0	0	0	0	0	0	0	0	0
WASHINGTON	-	-	-	-	-	-	-	-	-	-	-
WEST VIRGINIA	3	0	0	0	0	0	0	2	0	0	4
WISCONSIN	6	-	-	-	-	-	-	-	-	-	6
WYOMING	2	0	2	0	0	0	0	1	6	0	4
AMERICAN SAMOA	0	0	0	0	0	0	0	0	0	0	0
GUAM	0	0	0	0	0	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	12	0	0	0	0	2	12	12	12	2	10
U.S. & INSULAR AREAS	1,736	306	356	13	32	241	925	544	378	53	1,516
50 STATES, D.C. & P.R.	1,724	306	356	13	32	239	913	532	366	51	1,506

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

SPEECH IMPAIRED

STATE	TRANSITIONAL EMPLOYMENT SERVICES	VOCATIONAL PLACEMENT	POST EMPLOY-MENT	EVALUATION OF VR SERVICES	OTHER SERVICES	ALL SERVICES	NO SPECIAL SERVICES
ALABAMA	3	18	1	8	0	90	31
ALASKA	5	6	0	3	0	22	1
ARIZONA	7	12	8	47	0	122	32
ARKANSAS	1	4	0	1	34	52	30
CALIFORNIA	100	300	-	-	-	700	230
COLORADO	0	0	0	0	0	15	96
CONNECTICUT	0	1	0	2	0	15	0
DELAWARE	2	0	0	0	0	4	0
DISTRICT OF COLUMBIA	0	0	0	1	0	2	0
FLORIDA	75	111	53	111	20	810	27
GEORGIA	18	14	6	18	24	112	86
HAWAII	12	12	12	12	0	84	0
IDAHO	5	8	0	10	0	43	3
ILLINOIS	-	-	-	-	-	20	-
INDIANA	13	19	3	23	3	199	317
IOWA	0	0	0	0	0	0	25
KANSAS	2	11	52	8	1	131	83
KENTUCKY	3	12	3	9	4	78	39
LOUISIANA	6	5	6	3	32	84	61
MAINE	276	156	38	176	49	1,525	-
MARYLAND	32	284	190	127	0	1,143	32
MASSACHUSETTS	31	276	31	276	0	2,017	0
MICHIGAN	0	0	0	38	0	76	0
MINNESOTA	-	-	-	-	-	90	-
MISSISSIPPI	13	10	0	17	0	116	40
MISSOURI	0	0	9	0	5	19	183
MONTANA	1	2	1	1	0	24	7
NEBRASKA	43	22	5	37	0	249	0
NEVADA	-	-	-	-	0	0	1
NEW HAMPSHIRE	-	-	-	-	-	-	-
NEW JERSEY	15	15	15	0	0	86	101
NEW MEXICO	15	32	13	27	0	225	40
NEW YORK	0	381	0	0	0	761	1,145
NORTH CAROLINA	6	15	10	9	4	123	31
NORTH DAKOTA	0	1	0	18	1	29	8
OHIO	0	0	0	15	45	75	0
OKLAHOMA	0	0	0	0	10	10	21
OREGON	0	0	0	0	0	6	43
PENNSYLVANIA	21	161	3	145	0	760	760
PUERTO RICO	20	20	20	20	0	220	0
RHODE ISLAND	22	14	0	3	0	136	0
SOUTH CAROLINA	0	28	0	33	0	258	30
SOUTH DAKOTA	5	8	5	5	0	37	0
TENNESSEE	-	-	-	-	-	-	-
TEXAS	-	-	-	-	-	58	-
UTAH	1	1	0	1	0	19	12
VERMONT	-	-	-	-	0	0	1
VIRGINIA	0	6	0	0	0	15	0
WASHINGTON	-	-	-	-	-	-	-
WEST VIRGINIA	3	2	4	2	4	24	4
WISCONSIN	-	-	-	-	-	12	49
WYOMING	3	1	1	4	0	24	6
AMERICAN SAMOA	0	0	0	0	0	0	0
GUAM	0	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	10	2	12	0	86	0
U.S. & INSULAR AREAS	759	1,978	491	1,222	236	10,806	3,575
50 STATES, D.C. & P.R.	759	1,968	489	1,210	236	10,720	3,575

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER
LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR
BY HANDICAPPING CONDITION

MENTALLY RETARDED

STATE	COUNSELING/ GUIDANCE	TRANS- PORTATION	TECHNO- LOGICAL AIDES	INTER- PRETER SERVICES	READER SERVICES	PHYSICAL/ MENTAL RESTOR- ATION	FAMILY SERVICES	INDEP- ENDENT LIVING	MAINT- ENANCE	RESID- ENTIAL SERVICES	VOCATIONAL/ TRAINING SERVICES
ALABAMA	2,504	693	60	8	28	416	1,291	284	443	86	2,014
ALASKA	17	12	0	0	0	1	8	12	11	7	24
ARIZONA	104	90	16	0	5	13	38	81	92	35	175
ARKANSAS	8	2	3	3	0	1	1	4	0	2	14
CALIFORNIA	984	-	492	-	-	-	369	615	-	-	615
COLORADO	61	72	16	2	0	32	61	152	156	17	305
CONNECTICUT	349	31	0	0	0	254	13	15	142	11	320
DELAWARE	92	55	1	0	0	9	24	36	46	20	98
DISTRICT OF COLUMBIA	0	33	0	0	0	0	50	53	33	0	61
FLORIDA	783	517	21	14	21	192	379	138	334	40	813
GEORGIA	300	242	4	1	35	43	214	201	276	45	719
HAWAII	0	74	50	0	50	60	32	50	32	16	121
IDAHO	97	49	3	4	9	21	41	72	60	48	143
ILLINOIS	-	-	-	-	-	-	-	-	-	-	-
INDIANA	768	454	21	0	22	67	259	373	232	252	1,218
IOWA	97	557	13	12	12	355	87	127	227	65	669
KANSAS	164	165	3	1	1	26	47	131	124	89	288
KENTUCKY	800	269	91	1	10	156	274	300	417	73	982
LOUISIANA	556	257	51	0	19	88	151	213	173	185	730
MAINE	391	-	-	-	-	19	391	119	88	-	207
MARYLAND	488	244	29	0	0	43	548	336	396	305	548
MASSACHUSETTS	306	60	85	0	0	0	274	274	28	12	254
MICHIGAN	1,322	390	0	0	0	0	229	51	134	398	1,356
MINNESOTA	-	-	-	-	-	-	-	385	-	-	685
MISSISSIPPI	429	168	4	0	0	54	113	138	238	31	607
MISSOURI	789	1,067	5	0	0	140	134	121	478	43	1,137
MONTANA	47	21	4	0	0	8	13	29	42	15	77
NEBRASKA	51	108	0	0	0	0	51	48	96	100	78
NEVADA	9	5	-	-	-	-	1	11	6	2	27
NEW HAMPSHIRE	-	-	-	-	-	-	-	-	-	-	-
NEW JERSEY	458	230	0	0	0	0	171	230	171	230	230
NEW MEXICO	91	63	5	2	0	28	43	65	50	25	147
NEW YORK	766	0	0	0	383	192	1,340	1,915	1,149	575	1,149
NORTH CAROLINA	726	373	22	16	16	62	237	343	308	86	1,334
NORTH DAKOTA	55	47	4	0	0	2	24	59	31	30	106
OHIO	1,484	126	12	0	0	216	203	113	792	0	1,228
OKLAHOMA	300	130	0	0	0	35	190	20	395	0	930
OREGON	13	6	0	4	0	0	2	17	6	10	29
PENNSYLVANIA	832	1,180	120	4	155	259	934	560	656	436	1,933
PUERTO RICO	987	987	0	0	0	987	987	987	987	0	987
RHODE ISLAND	46	24	22	4	5	17	13	21	28	39	62
SOUTH CAROLINA	904	314	152	0	3	311	220	464	271	114	1,296
SOUTH DAKOTA	308	6	18	0	0	35	16	45	19	39	308
TENNESSEE	-	-	-	-	-	-	-	-	-	-	-
TEXAS	-	430	-	-	-	586	455	497	416	413	635
UTAH	143	53	20	8	6	19	40	78	39	45	122
VERMONT	-	-	-	-	-	-	-	-	-	-	2
VIRGINIA	247	1,036	5	0	0	132	158	1,396	1,453	320	1,259
WASHINGTON	195	60	-	-	-	-	30	30	90	180	270
WEST VIRGINIA	323	135	3	0	1	49	108	155	125	28	461
WISCONSIN	815	78	32	-	-	-	-	106	620	502	815
WYOMING	9	5	0	1	0	0	3	11	2	8	20
AMERICAN SAMOA	9	0	0	0	0	0	0	0	0	0	9
GUAM	0	4	0	0	0	0	0	3	9	0	14
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	45	0	0	0	0	5	36	45	0	2	45
U.S. & INSULAR AREAS	20,332	10,922	1,387	85	789	4,933	10,303	11,529	11,921	4,979	27,676
50 STATES, D.C. & P.R.	20,278	10,918	1,387	85	789	4,928	10,267	11,481	11,912	4,977	27,608

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

MENTALLY RETARDED

STATE	TRANSITIONAL EMPLOYMENT SERVICES	VOCATIONAL PLACEMENT	POST EMPLOY-MENT	EVALUATION OF VR SERVICES	OTHER SERVICES	ALL SERVICES	NO SPECIAL SERVICES
ALABAMA	1,004	1,631	880	1,629	56	13,027	1,025
ALASKA	25	22	10	26	0	175	8
ARIZONA	140	158	68	140	14	1,169	16
ARKANSAS	5	10	7	5	2	67	3
CALIFORNIA	984	615	-	-	-	4,674	424
COLORADO	305	305	305	0	0	1,789	40
CONNECTICUT	104	313	6	313	0	1,871	0
DELAWARE	75	58	48	87	0	649	11
DISTRICT OF COLUMBIA	1	3	3	57	5	299	0
FLORIDA	616	902	543	789	196	6,298	46
GEORGIA	396	612	296	700	46	4,190	218
HAWAII	121	87	91	121	0	905	0
IDAHO	102	117	56	128	14	964	15
ILLINOIS	-	-	-	-	-	4,349	-
INDIANA	484	971	341	1,032	84	6,578	105
IOWA	599	619	500	375	9	4,403	167
KANSAS	148	202	152	257	26	1,824	66
KENTUCKY	669	800	428	828	207	6,305	187
LOUISIANA	147	499	229	337	109	3,744	157
MAINE	414	207	234	264	68	2,402	-
MARYLAND	548	548	579	488	0	5,100	29
MASSACHUSETTS	29	254	29	254	0	1,859	0
MICHIGAN	151	151	21	1,215	0	5,418	417
MINNESOTA	685	685	685	685	-	3,810	-
MISSISSIPPI	268	512	198	612	45	3,425	223
MISSOURI	1,072	1,411	455	1,155	27	8,034	158
MONTANA	61	74	32	65	27	515	0
NEBRASKA	128	126	60	28	0	874	0
NEVADA	19	25	2	15	1	123	1
NEW HAMPSHIRE	-	-	-	-	-	-	-
NEW JERSEY	230	230	230	517	0	2,927	56
NEW MEXICO	88	96	59	90	4	856	16
NEW YORK	0	1,724	0	1,340	0	10,533	0
NORTH CAROLINA	520	1,066	436	1,060	24	6,629	221
NORTH DAKOTA	74	75	29	67	10	613	9
OHIO	292	1,946	306	791	100	7,609	575
OKLAHOMA	845	535	55	935	200	4,570	95
OREGON	20	32	4	29	0	172	26
PENNSYLVANIA	1,341	1,792	462	1,568	21	12,253	260
PUERTO RICO	987	987	987	987	0	10,857	0
RHODE ISLAND	38	23	0	41	22	405	0
SOUTH CAROLINA	403	801	311	1,108	0	6,672	233
SOUTH DAKOTA	308	308	284	207	0	1,901	0
TENNESSEE	-	-	-	-	-	-	-
TEXAS	446	637	495	520	-	5,530	-
UTAH	80	88	47	90	4	882	0
VERMONT	-	-	6	-	6	14	15
VIRGINIA	1,053	1,052	1,678	745	0	10,534	0
WASHINGTON	165	210	90	65	-	1,385	120
WEST VIRGINIA	267	311	187	434	39	2,626	133
WISCONSIN	815	815	-	815	-	5,413	0
WYOMING	15	14	6	10	1	105	6
AMERICAN SAMOA	9	9	0	9	0	45	0
GUAM	0	0	35	62	0	127	0
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	45	45	45	45	0	358	2
U.S. & INSULAR AREAS	17,341	24,713	12,090	23,140	1,367	187,856	5,083
50 STATES, D.C. & P.R.	17,287	24,659	12,010	23,024	1,367	187,326	5,081

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

EMOTIONALLY DISTURBED

STATE	COUNSELING/ GUIDANCE	TRANS- PORTATION	TECHNO- LOGICAL AIDES	INTER- PRETER SERVICES	READER SERVICES	PHYSICAL/ MENTAL RESTOR- ATION	FAMILY SERVICES	INDEP- ENDENT LIVING	MAINT- ENANCE	RESID- ENTIAL SERVICES	VOCATIONAL/ TRAINING SERVICES
ALABAMA	86	5	0	0	0	77	19	4	10	5	288
ALASKA	15	0	0	0	0	0	4	0	3	4	4
ARIZONA	171	11	6	0	2	48	82	31	47	12	133
ARKANSAS	14	2	0	0	0	1	4	2	1	1	9
CALIFORNIA	383	-	-	-	-	-	239	239	-	-	383
COLORADO	183	17	0	0	0	16	128	0	159	27	86
CONNECTICUT	1,064	11	0	0	0	33	146	15	15	29	219
DELAWARE	132	7	0	0	0	7	52	19	40	23	136
DISTRICT OF COLUMBIA	0	0	0	0	0	1	0	2	0	0	0
FLORIDA	547	158	0	0	0	240	410	392	139	204	331
GEORGIA	387	40	3	0	2	89	129	23	58	33	227
HAWAII	0	14	28	0	0	28	23	28	14	3	28
IDAHO	32	5	0	0	1	12	10	3	5	4	21
ILLINOIS	-	-	-	-	-	-	-	-	-	-	-
INDIANA	144	53	0	0	1	29	80	24	29	50	162
IOWA	132	290	2	0	0	22	229	1	1	53	136
KANSAS	619	58	0	0	0	391	147	96	54	48	519
KENTUCKY	335	113	4	0	0	70	372	28	191	40	195
LOUISIANA	293	19	0	0	9	12	165	20	10	34	143
MAINE	391	0	-	-	-	19	391	116	86	-	207
MARYLAND	252	51	24	0	0	239	252	126	201	24	227
MASSACHUSETTS	197	39	57	0	0	197	178	178	19	8	165
MICHIGAN	0	0	0	0	0	0	0	0	0	0	663
MINNESOTA	550	-	-	-	-	-	550	-	-	-	-
MISSISSIPPI	17	4	0	0	0	7	6	3	4	2	14
MISSOURI	162	172	0	0	0	0	0	0	0	5	52
MONTANA	30	1	5	0	0	1	9	5	3	2	17
NEBRASKA	165	73	0	0	0	60	89	131	72	49	135
NEVADA	24	-	-	-	-	1	11	-	-	-	19
NEW HAMPSHIRE	-	-	-	-	-	-	-	-	-	-	-
NEW JERSEY	915	0	0	0	0	202	815	408	0	307	408
NEW MEXICO	120	17	0	0	1	7	14	19	10	3	39
NEW YORK	290	0	0	0	0	870	2,320	2,030	0	870	1,450
NORTH CAROLINA	188	39	7	7	9	39	101	54	31	23	162
NORTH DAKOTA	27	3	1	0	0	1	13	10	2	2	15
OHIO	195	0	0	0	0	56	28	28	56	0	139
OKLAHOMA	46	8	0	0	0	35	11	4	4	6	34
OREGON	56	0	0	0	0	0	30	8	0	0	8
PENNSYLVANIA	983	57	0	0	52	226	783	77	14	41	831
PUERTO RICO	8	8	0	0	0	0	8	0	8	0	8
RHODE ISLAND	54	6	0	0	0	4	50	48	39	22	44
SOUTH CAROLINA	213	24	27	0	2	56	50	22	32	13	139
SOUTH DAKOTA	8	50	0	0	0	0	28	0	0	18	15
TENNESSEE	-	-	-	-	-	-	-	-	-	-	-
TEXAS	582	105	-	-	-	420	-	-	-	-	118
UTAH	372	75	0	0	2	0	59	30	9	6	364
VERMONT	-	-	-	-	-	-	-	-	1	-	-
VIRGINIA	272	5	0	0	0	107	95	44	8	69	223
WASHINGTON	165	-	-	15	-	-	90	-	-	105	165
WEST VIRGINIA	91	23	0	0	4	2	32	8	23	6	89
WISCONSIN	138	-	-	-	-	-	138	-	-	-	3
WYOMING	38	0	0	0	0	0	1	0	1	3	16
AMERICAN SAMOA	0	0	0	0	0	0	0	0	0	0	0
GUAM	3	0	0	0	0	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	18	0	0	0	0	0	13	13	18	3	18
U.S. & INSULAR AREAS	11,027	1,563	164	22	85	3,641	8,404	4,297	1,419	2,157	8,807
50 STATES, D.C. & P.R.	11,086	1,563	164	22	85	3,641	8,391	4,284	1,401	2,154	8,789

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

EMOTIONALLY DISTURBED

STATE	TRANSITIONAL EMPLOYMENT SERVICES	VOCATIONAL PLACEMENT	POST EMPLOY-MENT	EVALUATION OF VR SERVICES	OTHER SERVICES	ALL SERVICES	NO SPECIAL SERVICES
ALABAMA	9	279	6	21	3	812	0
ALASKA	3	4	3	3	0	43	10
ARIZONA	88	120	55	83	5	894	55
ARKANSAS	3	8	1	5	0	51	5
CALIFORNIA	383	383	-	-	-	2,010	79
COLORADO	86	86	86	0	0	874	28
CONNECTICUT	83	87	54	308	0	2,064	0
DELAWARE	53	101	56	82	4	712	32
DISTRICT OF COLUMBIA	0	2	1	0	1	7	3
FLORIDA	87	271	111	408	0	3,298	57
GEORGIA	115	256	48	247	10	1,667	268
HAWAII	28	28	28	28	0	278	0
IDAHO	13	18	12	18	4	158	2
ILLINOIS	-	-	-	-	-	509	-
INDIANA	63	82	48	91	2	858	19
IOWA	51	83	87	0	5	1,092	111
KANSAS	221	264	52	409	11	2,889	40
KENTUCKY	193	249	233	97	68	2,188	5
LOUISIANA	14	112	10	63	2	906	16
MAINE	414	207	234	264	68	2,399	-
MARYLAND	227	227	227	227	0	2,304	0
MASSACHUSETTS	18	165	18	165	0	1,404	0
MICHIGAN	663	663	663	663	0	3,315	0
MINNESOTA	-	-	-	-	-	1,100	-
MISSISSIPPI	6	8	4	11	0	88	1
MISSOURI	14	19	0	61	5	490	42
MONTANA	11	18	5	15	5	127	0
NEBRASKA	141	75	49	140	0	1,179	0
NEVADA	3	31	-	14	0	103	1
NEW HAMPSHIRE	-	-	-	-	-	-	-
NEW JERSEY	408	408	408	509	0	4,788	102
NEW MEXICO	32	25	12	22	3	324	30
NEW YORK	0	1,450	0	1,160	0	10,440	0
NORTH CAROLINA	100	141	50	126	8	1,085	42
NORTH DAKOTA	5	14	5	18	13	129	3
OHIO	28	84	0	56	14	684	14
OKLAHOMA	32	26	4	38	20	268	6
OREGON	0	0	0	8	0	118	54
PENNSYLVANIA	385	761	154	676	0	4,968	96
PUERTO RICO	8	8	8	8	0	88	0
RHODE ISLAND	18	42	0	11	0	338	0
SOUTH CAROLINA	59	107	59	107	0	910	49
SOUTH DAKOTA	0	50	0	15	4	188	0
TENNESSEE	-	-	-	-	-	-	-
TEXAS	-	118	-	137	-	1,480	-
UTAH	65	191	31	111	0	1,323	17
VERMONT	-	-	2	-	4	7	2
VIRGINIA	107	189	173	160	0	1,452	0
WASHINGTON	-	135	-	120	-	795	-
WEST VIRGINIA	22	59	36	67	5	467	15
WISCONSIN	-	7	-	-	-	286	-
WYOMING	10	11	6	10	3	99	50
AMERICAN SAMOA	0	0	0	0	0	0	0
GUAM	3	3	0	0	0	9	0
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	3	18	0	16	0	120	0
U.S. & INSULAR AREAS	4,275	7,693	3,039	6,798	267	64,167	1,254
50 STATES, D.C. & P.R.	4,269	7,672	3,039	6,782	267	64,038	1,254

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

HARD OF HEARING & DEAF

STATE	COUNSELING/ GUIDANCE	TRANS- PORTATION	TECHNO- LOGICAL AIDES	INTER- PRETER SERVICES	READER SERVICES	PHYSICAL/ MENTAL RESTOR- ATION	FAMILY SERVICES	INDEP- ENDENT LIVING	MAINT- ENANCE	RESID- ENTIAL SERVICES	VOCATIONAL/ TRAINING SERVICES
ALABAMA	20	4	8	10	0	1	0	5	4	0	23
ALASKA	2	0	1	2	0	1	0	2	1	1	4
ARIZONA	17	5	29	42	0	1	8	2	15	0	35
ARKANSAS	1	0	14	15	0	0	1	14	12	0	15
CALIFORNIA	347	-	334	-	-	-	-	69	-	-	119
COLORADO	2	8	6	28	0	2	0	26	0	3	21
CONNECTICUT	23	0	1	5	0	2	0	0	2	0	7
DELAWARE	4	0	0	6	0	0	0	5	0	0	13
DISTRICT OF COLUMBIA	0	0	0	0	0	0	0	0	0	0	0
FLORIDA	28	7	34	29	27	13	28	7	22	0	50
GEORGIA	33	14	24	23	2	5	16	7	13	1	36
HAWAII	0	22	53	53	53	24	15	38	22	0	53
IDAHO	9	4	9	7	0	1	6	3	3	2	9
ILLINOIS	-	-	-	-	-	-	-	-	-	-	-
INDIANA	39	21	41	30	12	8	12	10	10	5	72
IOWA	27	0	11	14	0	2	6	11	0	0	22
KANSAS	15	0	6	29	5	2	0	3	17	3	16
KENTUCKY	24	7	28	16	0	0	17	4	5	0	26
LOUISIANA	119	92	110	120	8	90	95	98	91	40	111
MAINE	77	0	-	-	-	11	77	21	15	-	39
MARYLAND	90	6	97	47	0	1	62	10	32	0	57
MASSACHUSETTS	20	3	2	20	0	0	10	10	0	0	17
MICHIGAN	0	62	34	7	0	0	0	3	0	0	208
MINNESOTA	45	-	-	45	-	-	-	-	-	-	45
MISSISSIPPI	22	16	13	16	0	5	12	6	8	8	28
MISSOURI	10	5	10	185	0	0	0	0	0	0	122
MONTANA	20	2	18	3	1	0	7	1	22	0	23
NEBRASKA	15	31	22	53	0	0	21	37	10	17	35
NEVADA	3	4	6	10	-	3	4	3	4	1	6
NEW HAMPSHIRE	-	-	-	-	-	-	-	-	-	-	-
NEW JERSEY	9	0	10	13	0	0	3	0	0	0	9
NEW MEXICO	12	1	2	5	0	0	1	1	2	0	9
NEW YORK	31	0	142	146	0	0	0	25	0	0	100
NORTH CAROLINA	70	9	93	89	2	7	11	33	24	1	102
NORTH DAKOTA	3	1	2	5	2	0	0	0	1	0	6
OHIO	52	0	68	129	0	13	39	0	0	13	39
OKLAHOMA	0	0	32	19	0	17	4	4	8	0	34
OREGON	4	4	0	2	0	0	0	4	0	0	4
PENNSYLVANIA	98	15	36	82	3	11	35	3	22	0	109
PUERTO RICO	94	94	0	0	0	94	94	94	94	0	94
RHODE ISLAND	9	3	9	5	0	0	11	11	11	0	11
SOUTH CAROLINA	101	5	53	80	1	6	1	5	11	0	52
SOUTH DAKOTA	0	0	23	11	0	0	0	10	0	0	14
TENNESSEE	-	-	-	-	-	-	-	-	-	-	-
TEXAS	94	60	294	282	-	98	72	78	54	-	90
UTAH	12	0	7	5	0	2	1	5	0	0	13
VERMONT	-	-	-	-	-	-	-	-	-	1	1
VIRGINIA	14	3	0	36	0	0	1	34	5	1	34
WASHINGTON	-	-	15	-	15	-	-	-	-	-	-
WEST VIRGINIA	3	1	17	19	0	1	2	0	17	0	10
WISCONSIN	10	-	-	8	-	-	-	-	-	-	3
WYOMING	2	0	0	1	0	0	0	0	0	0	1
AMERICAN SAMOA	0	0	0	0	0	0	0	0	0	0	0
GUAM	0	0	0	4	0	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	0	0	0	0	0	0	0	0	0	0
U.S. & INSULAR AREAS	1,630	509	1,714	1,756	131	421	672	702	557	97	1,947
50 STATES, D.C. & P.R.	1,630	509	1,714	1,752	131	421	672	702	557	97	1,947

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

HARD OF HEARING & DEAF

STATE	TRANSITIONAL EMPLOYMENT SERVICES	VOCATIONAL PLACEMENT	POST EMPLOY-MENT	EVALUATION OF VR SERVICES	OTHER SERVICES	ALL SERVICES	NO SPECIAL SERVICES
ALABAMA	6	30	8	18	3	140	10
ALASKA	4	3	2	5	0	28	0
ARIZONA	17	43	9	37	4	264	3
ARKANSAS	0	15	0	3	3	93	0
CALIFORNIA	149	149	-	-	-	1,167	103
COLORADO	21	21	21	0	0	159	4
CONNECTICUT	0	10	1	9	0	60	0
DELAWARE	0	0	3	13	0	44	4
DISTRICT OF COLUMBIA	0	0	0	0	0	0	0
FLORIDA	57	50	28	43	0	423	14
GEORGIA	24	34	11	41	5	209	15
HAWAII	53	53	53	53	0	545	0
IDAHO	7	6	3	9	2	80	3
ILLINOIS	-	-	-	-	-	440	-
INDIANA	31	56	24	63	0	434	1
IOWA	19	22	19	22	0	175	2
KANSAS	7	7	1	3	7	121	0
KENTUCKY	19	25	13	26	2	212	13
LOUISIANA	8	30	21	115	80	1,236	19
MAINE	61	45	12	50	14	422	-
MARYLAND	62	85	46	35	0	630	7
MASSACHUSETTS	2	17	2	17	0	120	0
MICHIGAN	0	0	0	208	0	522	0
MINNESOTA	45	45	45	45	-	315	-
MISSISSIPPI	18	27	14	30	0	223	4
MISSOURI	5	159	0	209	0	705	19
MONTANA	20	13	18	23	0	171	0
NEBRASKA	41	37	17	26	0	362	0
NEVADA	6	4	4	5	3	66	3
NEW HAMPSHIRE	-	-	-	-	-	-	-
NEW JERSEY	9	9	9	0	0	71	0
NEW MEXICO	1	6	5	14	0	59	2
NEW YORK	0	151	0	75	0	670	0
NORTH CAROLINA	13	67	28	49	1	591	6
NORTH DAKOTA	4	2	0	4	0	30	0
OHIO	0	155	13	68	13	602	13
OKLAHOMA	25	20	0	34	7	204	18
OREGON	0	6	0	3	0	27	0
PENNSYLVANIA	51	103	16	98	0	682	13
PUERTO RICO	94	94	94	94	0	1,034	0
RHODE ISLAND	8	9	0	11	0	98	1
SOUTH CAROLINA	14	42	5	31	26	433	19
SOUTH DAKOTA	15	12	19	24	0	128	0
TENNESSEE	-	-	-	-	-	-	-
TEXAS	-	84	66	64	-	1,336	-
UTAH	5	11	3	5	1	70	0
VERMONT	-	-	-	-	0	2	1
VIRGINIA	0	6	3	20	0	157	0
WASHINGTON	-	-	-	-	-	30	-
WEST VIRGINIA	5	8	2	21	0	186	0
WISCONSIN	-	-	-	-	-	21	20
WYOMING	0	1	0	2	1	8	1
AMERICAN SAMOA	0	0	0	0	0	0	0
GUAM	4	4	4	4	0	20	0
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	0	0	0	0	0	0
U.S. & INSULAR AREAS	930	1,784	634	1,729	172	15,825	318
50 STATES, D.C. & P.R.	926	1,780	630	1,725	172	15,805	318

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

MULTIHANDICAPPED

STATE	COUNSELING/ GUIDANCE	TRANS- PORTATION	TECHNO- LOGICAL AIDES	INTER- PRETER SERVICES	READER SERVICES	PHYSICAL/ MENTAL RESTOR- ATION	FAMILY SERVICES	INDEP- ENDENT LIVING	MAINT- ENANCE	RESID- ENTIAL SERVICES	VOCATIONAL/ TRAINING SERVICES
ALABAMA	10	10	3	0	1	16	19	10	24	15	8
ALASKA	10	4	3	0	0	2	0	3	3	2	6
ARIZONA	12	14	10	1	0	11	11	9	15	12	17
ARKANSAS	4	2	0	1	1	1	1	7	7	5	6
CALIFORNIA	588	470	530	235	–	–	470	411	–	294	530
COLORADO	12	17	21	3	0	9	19	19	74	7	40
CONNECTICUT	24	17	3	0	0	5	2	4	4	14	12
DELAWARE	0	0	0	0	0	0	0	1	0	1	1
DISTRICT OF COLUMBIA	0	0	0	0	0	0	0	0	0	0	0
FLORIDA	0	0	0	0	0	0	0	0	0	0	0
GEORGIA	–	–	–	–	–	–	–	–	–	–	–
HAWAII	0	13	13	13	13	13	13	13	13	0	13
IDAHO	3	2	0	0	0	2	3	2	2	4	4
ILLINOIS	–	–	–	–	–	–	–	–	–	–	–
INDIANA	39	46	21	2	1	37	36	21	44	38	61
IOWA	0	34	0	0	0	6	18	30	23	30	46
KANSAS	5	22	1	0	0	28	15	3	15	38	5
KENTUCKY	17	28	14	0	0	7	18	16	18	12	28
LOUISIANA	3	11	3	1	0	2	4	7	16	23	8
MAINE	78	0	–	–	–	9	78	23	17	–	41
MARYLAND	187	156	156	12	12	156	118	99	187	56	175
MASSACHUSETTS	33	8	10	0	0	0	27	27	0	1	28
MICHIGAN	0	0	0	0	0	0	0	0	0	64	0
MINNESOTA	–	–	–	–	–	–	–	–	–	–	–
MISSISSIPPI	0	0	0	0	0	0	0	0	0	0	0
MISSOURI	9	14	0	0	0	0	0	19	38	20	14
MONTANA	16	8	2	0	1	1	6	4	13	5	10
NEBRASKA	7	14	0	0	0	4	12	9	8	12	15
NEVADA	–	6	–	–	–	–	2	–	2	2	2
NEW HAMPSHIRE	–	–	–	–	–	–	–	–	–	–	–
NEW JERSEY	29	10	19	0	0	19	10	10	10	0	39
NEW MEXICO	19	9	3	1	1	8	5	6	5	6	13
NEW YORK	294	288	588	59	59	294	294	294	294	294	294
NORTH CAROLINA	30	21	9	0	4	15	28	6	13	33	28
NORTH DAKOTA	2	3	2	0	0	2	3	6	7	6	4
OHIO	20	10	20	20	0	10	10	30	20	30	71
OKLAHOMA	7	12	0	0	0	3	2	15	9	5	16
OREGON	0	0	0	0	0	0	0	0	0	0	0
PENNSYLVANIA	10	15	13	0	0	13	17	9	15	16	11
PUERTO RICO	87	87	0	0	0	87	87	87	87	0	87
RHODE ISLAND	13	10	12	7	12	5	14	15	13	11	17
SOUTH CAROLINA	3	4	1	2	0	6	4	2	3	12	8
SOUTH DAKOTA	12	4	14	0	0	0	0	0	32	30	27
TENNESSEE	–	–	–	–	–	–	–	–	–	–	–
TEXAS	–	97	–	–	–	–	88	–	–	92	–
UTAH	88	72	27	8	7	39	54	40	57	50	85
VERMONT	–	–	–	–	–	–	–	–	–	–	1
VIRGINIA	9	9	0	0	0	8	8	22	20	2	24
WASHINGTON	–	–	–	–	–	–	–	–	–	–	–
WEST VIRGINIA	–	–	–	–	–	–	–	–	–	–	–
WISCONSIN	30	30	–	–	–	–	–	30	30	–	30
WYOMING	2	0	0	0	0	0	0	1	1	3	3
AMERICAN SAMOA	0	0	0	0	0	0	0	0	0	0	0
GUAM	0	0	0	0	0	0	0	0	0	0	0
NORTHERN MARIANAS	–	–	–	–	–	–	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–	–	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–	–	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	6	0	0	0	0	6	6	6	6	0	6
U.S. & INSULAR AREAS	1,722	1,593	1,510	373	112	824	1,502	1,316	1,145	1,245	1,834
50 STATES, D.C. & P.R.	1,716	1,593	1,510	373	112	818	1,496	1,310	1,139	1,245	1,828

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

MULTIHANDICAPPED

STATE	TRANSITIONAL EMPLOYMENT SERVICES	VOCATIONAL PLACEMENT	POST EMPLOY-MENT	EVALUATION OF VR SERVICES	OTHER SERVICES	ALL SERVICES	NO SPECIAL SERVICES
ALABAMA	8	9	7	17	1	166	0
ALASKA	4	4	2	5	0	48	0
ARIZONA	13	15	13	14	13	188	0
ARKANSAS	1	4	1	3	1	45	1
CALIFORNIA	530	530	-	-	-	4,588	0
COLORADO	40	40	40	0	0	341	0
CONNECTICUT	5	5	0	5	0	190	0
DELAWARE	1	0	0	0	0	4	0
DISTRICT OF COLUMBIA	0	0	0	0	0	0	0
FLORIDA	0	0	0	0	0	0	0
GEORGIA	-	-	-	-	-	-	-
HAWAII	13	13	13	13	0	169	0
IDAHO	3	4	3	4	1	37	0
ILLINOIS	-	-	-	-	-	-	-
INDIANA	37	39	24	39	5	490	0
IOWA	40	40	30	11	6	326	0
KANSAS	17	4	12	2	18	185	4
KENTUCKY	15	20	7	20	0	228	6
LOUISIANA	1	8	0	5	4	96	2
MAINE	82	46	11	52	12	449	-
MARYLAND	187	187	187	187	0	2,062	12
MASSACHUSETTS	3	28	3	28	0	196	0
MICHIGAN	0	0	0	0	0	64	0
MINNESOTA	-	-	-	-	-	-	-
MISSISSIPPI	0	0	0	0	0	0	0
MISSOURI	24	42	14	24	0	218	41
MONTANA	8	6	3	6	2	91	8
NEBRASKA	16	16	0	13	0	126	0
NEVADA	2	2	-	1	-	19	1
NEW HAMPSHIRE	-	-	-	-	-	-	-
NEW JERSEY	39	39	39	29	0	292	68
NEW MEXICO	8	6	8	28	1	127	0
NEW YORK	0	294	588	294	0	4,228	0
NORTH CAROLINA	22	26	16	22	13	294	5
NORTH DAKOTA	6	1	2	5	1	50	0
OHIO	60	60	50	10	10	431	0
OKLAHOMA	16	18	11	16	2	138	0
OREGON	0	0	0	0	0	0	0
PENNSYLVANIA	10	10	9	10	1	159	0
PUERTO RICO	87	87	87	87	0	957	0
RHODE ISLAND	14	14	0	15	0	100	0
SOUTH CAROLINA	2	6	0	3	0	56	0
SOUTH DAKOTA	16	3	0	83	0	221	0
TENNESSEE	-	-	-	-	-	-	-
TEXAS	-	-	-	-	-	277	-
UTAH	81	67	59	63	1	796	0
VERMONT	-	-	-	-	0	1	-
VIRGINIA	8	38	31	28	0	285	0
WASHINGTON	15	15	-	15	-	45	-
WEST VIRGINIA	-	-	-	-	-	-	-
WISCONSIN	-	30	-	30	-	210	-
WYOMING	0	2	0	3	0	15	1
AMERICAN SAMOA	0	0	0	0	0	0	0
GUAM	0	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	6	6	6	6	6	66	0
U.S. & INSULAR AREAS	1,440	1,782	1,276	1,196	98	18,968	149
50 STATES, D.C. & P.R.	1,434	1,776	1,270	1,190	92	18,902	149

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER
LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR
BY HANDICAPPING CONDITION

ORTHOPEDICALLY IMPAIRED

STATE	COUNSELING/ GUIDANCE	TRANS- PORTATION	TECHNO- LOGICAL AIDES	INTER- PRETER SERVICES	READER SERVICES	PHYSICAL/ MENTAL RESTOR- ATION	FAMILY SERVICES	INDEP- ENDENT LIVING	MAINT- ENANCE	RESID- ENTIAL SERVICES	VOCATIONAL/ TRAINING SERVICES
ALABAMA	6	6	0	0	0	6	6	7	6	5	8
ALASKA	5	3	4	0	0	1	0	1	3	1	3
ARIZONA	6	15	4	0	0	2	3	8	3	3	12
ARKANSAS	2	3	3	0	0	1	0	0	1	0	2
CALIFORNIA	211	171	291	-	-	-	-	80	-	-	211
COLORADO	2	12	10	0	0	3	0	11	6	2	8
CONNECTICUT	13	1	0	0	0	5	0	0	2	0	9
DELAWARE	7	1	0	0	0	1	1	2	0	3	6
DISTRICT OF COLUMBIA	0	6	2	0	0	4	3	1	1	0	5
FLORIDA	74	15	7	0	0	15	15	15	15	8	54
GEORGIA	19	13	9	0	0	7	5	10	9	3	21
HAWAII	0	23	34	0	0	34	16	10	16	0	34
IDAHO	1	1	4	0	0	0	2	1	1	0	5
ILLINOIS	-	-	-	-	-	-	-	-	-	-	-
INDIANA	22	19	8	0	1	24	10	11	10	6	27
IOWA	6	6	6	3	0	5	3	6	5	5	10
KANSAS	7	5	3	0	0	4	2	3	3	1	3
KENTUCKY	2	12	11	0	0	19	1	10	10	2	20
LOUISIANA	13	19	3	1	1	11	4	13	11	4	26
MAINE	52	0	-	-	-	7	52	14	10	-	26
MARYLAND	33	26	26	0	0	33	17	17	29	5	29
MASSACHUSETTS	16	2	5	0	0	16	10	10	1	1	12
MICHIGAN	0	214	0	0	0	0	84	0	0	0	214
MINNESOTA	30	30	-	-	-	30	30	-	-	-	30
MISSISSIPPI	6	5	4	0	0	4	3	3	5	0	11
MISSOURI	34	33	0	0	0	0	10	0	5	0	48
MONTANA	1	1	0	0	0	0	1	2	0	0	1
NEBRASKA	4	17	12	0	0	2	7	15	15	4	14
NEVADA	1	-	-	-	-	1	-	1	1	-	1
NEW HAMPSHIRE	-	-	-	-	-	-	-	-	-	-	-
NEW JERSEY	8	12	12	0	0	17	3	0	0	0	7
NEW MEXICO	5	4	2	0	0	3	2	4	0	2	3
NEW YORK	0	108	72	0	0	10	36	126	0	0	90
NORTH CAROLINA	11	18	11	0	0	6	8	13	17	4	22
NORTH DAKOTA	3	5	2	0	0	3	2	2	2	3	5
OHIO	85	71	28	0	0	86	42	14	0	0	56
OKLAHOMA	0	7	7	0	0	9	7	0	7	0	9
OREGON	0	0	0	0	0	0	0	0	0	0	0
PENNSYLVANIA	59	78	43	0	24	83	77	41	32	39	93
PUERTO RICO	20	20	0	0	0	20	20	20	20	0	20
RHODE ISLAND	12	5	3	0	0	4	6	8	4	1	9
SOUTH CAROLINA	20	30	40	0	0	37	17	13	2	1	51
SOUTH DAKOTA	4	13	8	0	0	13	0	0	13	13	7
TENNESSEE	-	-	-	-	-	-	-	-	-	-	-
TEXAS	-	58	111	-	-	120	47	65	59	-	115
UTAH	9	10	8	0	0	11	8	12	8	8	14
VERMONT	-	-	-	-	-	-	-	-	-	-	-
VIRGINIA	4	5	0	0	0	3	1	6	1	0	11
WASHINGTON	0	-	0	-	-	-	0	-	-	-	15
WEST VIRGINIA	6	6	5	0	0	2	5	6	6	2	8
WISCONSIN	-	37	-	-	-	-	-	-	-	-	37
WYOMING	1	0	1	0	1	0	0	1	0	0	1
AMERICAN SAMOA	1	0	0	0	0	0	0	0	0	0	1
GUAM	0	0	0	0	0	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	1	1	0	0	0	0	0	0	1	0	1
U.S. & INSULAR AREAS	828	1,147	799	4	27	670	566	598	340	126	1,425
50 STATES, D.C. & P.R.	826	1,146	799	4	27	670	566	598	339	126	1,423

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

ORTHOPEDICALLY IMPAIRED

STATE	TRANSITIONAL EMPLOYMENT SERVICES	VOCATIONAL PLACEMENT	POST EMPLOY-MENT	EVALUATION OF VR SERVICES	OTHER SERVICES	ALL SERVICES	NO SPECIAL SERVICES
ALABAMA	7	8	6	7	1	79	0
ALASKA	3	3	2	4	1	34	1
ARIZONA	2	4	2	3	0	67	1
ARKANSAS	0	1	0	3	0	16	4
CALIFORNIA	211	211	–	–	–	1,388	30
COLORADO	8	0	8	0	0	78	38
CONNECTICUT	5	7	2	4	0	48	0
DELAWARE	5	6	6	8	0	46	0
DISTRICT OF COLUMBIA	0	0	1	3	3	29	2
FLORIDA	54	54	15	54	39	434	20
GEORGIA	10	14	6	29	1	156	0
HAWAII	34	26	26	34	0	295	0
IDAHO	1	5	0	5	0	26	1
ILLINOIS	–	–	–	–	–	286	–
INDIANA	12	27	10	20	0	287	8
IOWA	6	5	5	12	0	83	0
KANSAS	6	7	3	5	0	52	0
KENTUCKY	17	18	9	18	0	149	1
LOUISIANA	7	17	8	15	6	159	2
MAINE	54	30	8	34	9	296	–
MARYLAND	29	29	12	29	0	314	0
MASSACHUSETTS	1	12	1	12	0	99	0
MICHIGAN	84	0	0	214	0	810	0
MINNESOTA	30	30	–	30	–	240	–
MISSISSIPPI	5	5	5	7	0	63	0
MISSOURI	0	43	19	43	0	235	5
MONTANA	1	2	1	1	0	11	0
NEBRASKA	16	18	1	13	12	150	0
NEVADA	1	1	1	1	–	9	–
NEW HAMPSHIRE	–	–	–	–	–	–	–
NEW JERSEY	7	7	7	12	0	92	3
NEW MEXICO	2	4	1	3	1	36	5
NEW YORK	0	126	0	54	0	630	0
NORTH CAROLINA	5	28	2	29	1	167	1
NORTH DAKOTA	3	3	2	5	1	41	0
OHIO	56	56	28	57	28	607	289
OKLAHOMA	9	9	0	9	0	73	0
OREGON	0	0	0	0	0	0	0
PENNSYLVANIA	41	66	19	89	9	793	0
PUERTO RICO	20	20	20	20	0	220	0
RHODE ISLAND	4	16	0	7	0	79	0
SOUTH CAROLINA	23	31	23	53	0	347	5
SOUTH DAKOTA	0	0	0	0	0	71	0
TENNESSEE	–	–	–	–	–	–	–
TEXAS	76	118	50	85	–	984	–
UTAH	12	14	9	10	0	133	1
VERMONT	–	–	1	–	1	2	–
VIRGINIA	1	13	10	7	0	62	0
WASHINGTON	–	15	–	15	–	45	–
WEST VIRGINIA	4	7	4	8	2	71	2
WISCONSIN	–	9	–	9	–	92	–
WYOMING	1	0	0	0	0	6	0
AMERICAN SAMOA	1	1	0	1	0	5	0
GUAM	0	0	0	0	0	0	0
NORTHERN MARIANAS	–	–	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	1	1	0	1	2	9	0
U.S. & INSULAR AREAS	875	1,127	333	1,082	117	10,342	419
50 STATES, D.C. & P.R.	873	1,125	333	1,080	115	10,328	419

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER
LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR
BY HANDICAPPING CONDITION

OTHER HEALTH IMPAIRED

STATE	COUNSELING/ GUIDANCE	TRANS- PORTATION	TECHNO- LOGICAL AIDES	INTER- PRETER SERVICES	READER SERVICES	PHYSICAL/ MENTAL RESTOR- ATION	FAMILY SERVICES	INDEP- ENDENT LIVING	MAINT- ENANCE	RESID- ENTIAL SERVICES	VOCATIONAL/ TRAINING SERVICES
ALABAMA	7	0	0	0	0	7	0	0	2	0	8
ALASKA	2	0	1	0	0	0	0	1	1	1	1
ARIZONA	10	1	3	0	0	0	1	3	0	0	3
ARKANSAS	0	0	0	0	0	0	0	1	0	0	1
CALIFORNIA	350	-	70	-	-	-	-	70	-	-	280
COLORADO	-	-	-	-	-	-	-	-	-	-	-
CONNECTICUT	23	7	0	0	0	3	1	1	1	0	21
DELAWARE	0	0	0	0	0	0	0	0	0	0	0
DISTRICT OF COLUMBIA	0	0	0	0	0	0	0	0	0	0	0
FLORIDA	195	78	0	0	0	20	78	0	79	0	157
GEORGIA	8	3	0	0	0	2	5	4	2	0	14
HAWAII	0	0	0	0	0	0	0	0	0	0	0
IDAHO	3	0	0	0	0	0	0	0	0	0	6
ILLINOIS	-	-	-	-	-	-	-	-	-	-	-
INDIANA	0	0	0	0	0	0	0	0	0	0	0
IOWA	-	-	-	-	-	-	-	-	-	-	-
KANSAS	1	0	0	0	0	0	1	0	0	0	0
KENTUCKY	6	6	1	0	0	1	4	4	6	4	8
LOUISIANA	40	6	0	4	17	16	17	9	5	2	21
MAINE	52	0	-	-	-	7	52	14	10	-	26
MARYLAND	22	15	12	0	0	12	12	3	14	3	20
MASSACHUSETTS	21	3	6	0	0	21	15	15	1	1	16
MICHIGAN	0	0	0	0	0	0	0	0	0	0	0
MINNESOTA	44	-	-	-	-	44	-	-	44	-	-
MISSISSIPPI	-	-	-	-	-	-	-	-	-	-	-
MISSOURI	9	0	0	0	0	0	0	0	0	0	0
MONTANA	3	1	2	1	0	1	1	0	0	0	4
NEBRASKA	-	-	-	-	-	-	-	-	-	-	-
NEVADA	-	-	-	-	-	-	-	-	-	-	-
NEW HAMPSHIRE	-	-	-	-	-	-	-	-	-	-	-
NEW JERSEY	0	0	0	0	0	0	7	0	0	0	25
NEW MEXICO	2	1	1	0	0	1	1	2	0	0	2
NEW YORK	78	698	310	0	0	310	698	775	465	155	543
NORTH CAROLINA	35	18	1	2	2	3	13	12	14	17	37
NORTH DAKOTA	3	0	2	0	0	2	0	2	0	0	1
OHIO	-	-	-	-	-	-	-	-	-	-	-
OKLAHOMA	0	2	0	0	0	8	6	0	6	0	8
OREGON	3	0	0	0	0	0	4	3	0	0	0
PENNSYLVANIA	-	-	-	-	-	-	-	-	-	-	-
PUERTO RICO	35	35	0	0	0	35	35	35	35	0	35
RHODE ISLAND	9	4	1	0	1	0	6	10	5	0	14
SOUTH CAROLINA	36	1	33	0	0	33	2	34	1	1	36
SOUTH DAKOTA	0	4	0	0	0	1	0	4	0	3	5
TENNESSEE	-	-	-	-	-	-	-	-	-	-	-
TEXAS	-	-	83	-	-	62	-	-	-	79	-
UTAH	1	1	0	0	0	1	1	1	1	1	3
VERMONT	-	-	-	-	-	-	-	-	-	-	-
VIRGINIA	3	2	0	0	0	4	6	5	1	2	6
WASHINGTON	15	-	30	-	-	15	0	15	-	-	75
WEST VIRGINIA	40	35	0	0	0	0	2	0	1	1	38
WISCONSIN	-	-	-	-	-	-	-	-	5	-	-
WYOMING	3	0	1	0	0	1	0	1	1	0	4
AMERICAN SAMOA	0	0	0	0	0	0	0	0	0	0	0
GUAM	0	0	0	0	0	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	2	2	0	0	0	2	0	2	0	0	2
U.S. & INSULAR AREAS	1,061	923	557	7	20	612	968	1,026	700	270	1,420
50 STATES, D.C. & P.R.	1,059	921	557	7	20	610	968	1,024	700	270	1,418

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

OTHER HEALTH IMPAIRED

STATE	TRANSITIONAL EMPLOYMENT SERVICES	VOCATIONAL PLACEMENT	POST EMPLOY-MENT	EVALUATION OF VR SERVICES	OTHER SERVICES	ALL SERVICES	NO SPECIAL SERVICES
ALABAMA	0	6	0	6	0	36	0
ALASKA	2	2	2	2	0	15	0
ARIZONA	2	2	2	0	1	28	7
ARKANSAS	0	2	0	0	0	4	1
CALIFORNIA	210	280	-	-	-	1,260	99
COLORADO	-	-	-	-	-	-	-
CONNECTICUT	9	4	2	11	0	83	0
DELAWARE	0	0	0	0	0	0	0
DISTRICT OF COLUMBIA	0	1	1	0	0	2	1
FLORIDA	98	157	98	176	0	1,136	0
GEORGIA	10	11	4	10	0	73	4
HAWAII	0	0	0	0	0	0	0
IDAHO	2	4	0	6	1	22	2
ILLINOIS	-	-	-	-	-	118	-
INDIANA	1	1	1	0	0	3	1
IOWA	-	-	-	-	-	-	-
KANSAS	2	0	10	2	0	16	8
KENTUCKY	2	2	6	7	1	58	9
LOUISIANA	2	22	9	10	15	195	18
MAINE	54	30	8	34	9	296	-
MARYLAND	14	14	10	20	0	171	0
MASSACHUSETTS	2	16	2	16	0	135	0
MICHIGAN	0	0	0	0	0	0	0
MINNESOTA	44	-	-	-	-	176	-
MISSISSIPPI	-	-	-	-	-	-	-
MISSOURI	0	5	0	24	0	38	19
MONTANA	2	3	1	2	1	22	4
NEBRASKA	-	-	-	-	-	-	-
NEVADA	-	-	-	-	-	-	-
NEW HAMPSHIRE	-	-	-	-	-	-	-
NEW JERSEY	25	25	25	13	0	120	37
NEW MEXICO	1	1	1	1	2	16	1
NEW YORK	0	623	0	465	0	5,120	7
NORTH CAROLINA	14	28	7	34	4	241	9
NORTH DAKOTA	0	0	0	0	0	10	0
OHIO	-	-	-	-	-	-	-
OKLAHOMA	8	8	0	8	0	54	0
OREGON	0	0	0	3	0	13	36
PENNSYLVANIA	-	-	-	-	-	-	-
PUERTO RICO	35	35	35	35	0	385	0
RHODE ISLAND	3	8	0	3	0	64	0
SOUTH CAROLINA	2	1	1	36	0	217	0
SOUTH DAKOTA	2	1	0	4	0	24	0
TENNESSEE	-	-	-	-	-	-	-
TEXAS	-	-	-	-	-	224	-
UTAH	1	3	1	3	0	18	0
VERMONT	-	-	-	-	0	0	1
VIRGINIA	0	7	6	4	0	46	0
WASHINGTON	30	15	45	45	-	285	15
WEST VIRGINIA	2	38	4	38	0	199	1
WISCONSIN	-	-	-	20	-	25	-
WYOMING	3	3	3	4	0	24	0
AMERICAN SAMOA	0	0	0	0	0	0	0
GUAM	0	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	2	2	0	0	0	14	0
U.S. & INSULAR AREAS	584	1,360	284	1,042	34	10,986	280
50 STATES, D.C. & P.R.	582	1,358	284	1,042	34	10,972	280

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

VISUALLY HANDICAPPED

STATE	COUNSELING/ GUIDANCE	TRANS- PORTATION	TECHNO- LOGICAL AIDES	INTER- PRETER SERVICES	READER SERVICES	PHYSICAL/ MENTAL RESTOR- ATION	FAMILY SERVICES	INDEP- ENDENT LIVING	MAINT- ENANCE	RESID- ENTIAL SERVICES	VOCATIONAL/ TRAINING SERVICES
ALABAMA	7	5	5	1	3	2	2	4	3	0	11
ALASKA	1	0	1	0	2	0	0	0	1	0	2
ARIZONA	11	8	8	1	10	4	8	8	5	0	11
ARKANSAS	4	1	0	0	2	0	1	7	6	7	4
CALIFORNIA	134	100	50	-	84	-	50	67	-	67	67
COLORADO	1	3	4	0	6	0	0	8	0	0	12
CONNECTICUT	2	0	0	0	1	0	0	0	0	0	0
DELAWARE	8	10	4	0	1	7	4	5	9	5	10
DISTRICT OF COLUMBIA	0	0	0	0	0	0	0	0	0	0	0
FLORIDA	14	14	14	0	14	0	0	14	0	7	0
GEORGIA	1	2	1	2	2	1	2	2	2	2	1
HAWAII	0	3	5	0	5	5	5	5	2	0	5
IDAHO	2	3	0	0	0	0	2	1	1	1	3
ILLINOIS	-	-	-	-	-	-	-	-	-	-	-
INDIANA	36	21	17	0	10	1	10	6	11	7	17
IOWA	9	6	6	1	6	1	2	2	2	1	9
KANSAS	4	1	2	0	3	0	1	2	2	4	6
KENTUCKY	7	12	8	0	4	0	0	3	0	1	12
LOUISIANA	9	11	14	0	10	0	5	14	1	2	12
MAINE	25	0	-	-	-	4	25	7	5	-	13
MARYLAND	32	40	40	0	40	4	32	20	38	4	32
MASSACHUSETTS	0	1	1	0	0	0	3	3	0	0	8
MICHIGAN	0	40	40	0	0	0	48	0	0	0	48
MINNESOTA	24	-	-	-	24	-	-	-	-	-	-
MISSISSIPPI	1	0	1	0	2	1	0	0	0	0	1
MISSOURI	9	10	15	0	15	0	0	20	15	0	56
MONTANA	1	0	0	0	2	0	0	2	0	1	3
NEBRASKA	2	6	9	0	6	0	3	6	2	2	6
NEVADA	-	-	-	-	-	-	-	-	-	-	-
NEW HAMPSHIRE	-	-	-	-	-	-	-	-	-	-	-
NEW JERSEY	1	0	0	0	2	0	1	0	0	0	2
NEW MEXICO	1	0	2	0	3	0	0	1	1	1	1
NEW YORK	12	42	60	0	84	0	0	0	0	0	24
NORTH CAROLINA	31	26	25	1	30	9	18	17	19	14	32
NORTH DAKOTA	2	10	11	0	9	0	0	2	0	0	9
OHIO	15	0	30	0	15	15	15	0	0	0	0
OKLAHOMA	0	4	5	0	3	0	0	2	2	1	6
OREGON	0	3	0	0	1	0	0	0	0	0	0
PENNSYLVANIA	45	44	66	0	27	13	13	2	2	4	74
PUERTO RICO	28	28	0	0	0	28	28	28	28	0	28
RHODE ISLAND	9	9	11	0	7	0	11	11	11	2	11
SOUTH CAROLINA	2	9	1	0	4	0	1	4	2	2	11
SOUTH DAKOTA	0	1	5	0	4	0	0	0	0	0	7
TENNESSEE	-	-	-	-	-	-	-	-	-	-	-
TEXAS	-	-	70	-	74	8	-	-	66	-	61
UTAH	4	1	0	0	1	0	1	1	0	0	5
VERMONT	-	-	-	-	-	-	-	-	-	-	-
VIRGINIA	3	12	0	0	7	0	0	2	2	0	10
WASHINGTON	-	-	-	-	-	-	-	-	-	-	15
WEST VIRGINIA	3	2	5	0	3	0	1	1	0	0	3
WISCONSIN	-	13	13	-	13	-	-	-	-	-	13
WYOMING	0	0	2	0	1	0	0	0	0	0	0
AMERICAN SAMOA	0	0	0	0	0	0	0	0	0	0	0
GUAM	0	0	0	0	0	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	0	0	0	0	0	2	0	0	0	0
U.S. & INSULAR AREAS	500	507	559	6	548	103	294	277	238	135	661
50 STATES, D.C. & P.R.	500	507	559	6	548	103	292	277	238	135	661

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

VISUALLY HANDICAPPED

STATE	TRANSITIONAL EMPLOYMENT SERVICES	VOCATIONAL PLACEMENT	POST EMPLOY-MENT	EVALUATION OF VR SERVICES	OTHER SERVICES	ALL SERVICES	NO SPECIAL SERVICES
ALABAMA	4	10	2	7	3	69	3
ALASKA	1	2	2	3	0	15	0
ARIZONA	8	10	8	13	10	121	1
ARKANSAS	1	3	1	2	1	40	0
CALIFORNIA	84	84	-	-	-	787	50
COLORADO	12	0	0	0	0	46	7
CONNECTICUT	0	2	0	2	0	7	0
DELAWARE	9	9	3	12	3	97	3
DISTRICT OF COLUMBIA	0	0	0	0	0	0	0
FLORIDA	0	0	0	0	0	77	33
GEORGIA	1	2	1	1	0	23	0
HAWAII	5	5	5	5	0	55	0
IDAHO	3	3	0	3	1	23	0
ILLINOIS	-	-	-	-	-	138	-
INDIANA	12	13	8	22	0	185	6
IOWA	8	8	2	8	1	72	0
KANSAS	0	2	1	5	2	35	2
KENTUCKY	4	6	1	4	0	62	11
LOUISIANA	3	11	13	16	7	128	0
MAINE	27	15	4	16	5	146	-
MARYLAND	36	36	36	36	0	426	0
MASSACHUSETTS	1	8	1	8	0	50	0
MICHIGAN	0	0	0	48	0	240	0
MINNESOTA	-	-	-	-	-	48	-
MISSISSIPPI	0	0	0	2	0	8	3
MISSOURI	19	24	5	24	5	217	14
MONTANA	2	2	0	3	0	16	0
NEBRASKA	5	7	2	7	0	63	0
NEVADA	-	-	-	-	-	-	-
NEW HAMPSHIRE	-	-	-	-	-	-	-
NEW JERSEY	2	2	2	0	0	12	1
NEW MEXICO	0	0	1	1	1	13	0
NEW YORK	0	48	0	36	0	306	0
NORTH CAROLINA	16	22	9	28	19	316	1
NORTH DAKOTA	3	6	0	10	0	62	0
OHIO	0	45	0	0	45	180	15
OKLAHOMA	6	6	3	6	0	44	0
OREGON	0	0	0	0	0	4	0
PENNSYLVANIA	37	51	18	80	2	478	14
PUERTO RICO	28	28	28	28	0	306	0
RHODE ISLAND	6	5	0	6	0	99	0
SOUTH CAROLINA	6	6	1	8	0	57	3
SOUTH DAKOTA	0	2	0	7	0	26	0
TENNESSEE	-	-	-	-	-	-	-
TEXAS	68	68	65	54	-	534	-
UTAH	1	2	1	4	0	21	0
VERMONT	-	-	-	-	-	-	0
VIRGINIA	0	9	1	6	0	52	0
WASHINGTON	-	15	-	15	-	45	-
WEST VIRGINIA	2	0	1	4	2	27	4
WISCONSIN	-	-	-	-	-	52	0
WYOMING	0	0	0	0	0	3	3
AMERICAN SAMOA	0	0	0	0	0	0	0
GUAM	0	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	0	0	0	0	2	0
U.S. & INSULAR AREAS	420	577	225	540	107	5,835	174
50 STATES, D.C. & P.R.	420	577	225	540	107	5,833	174

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

DEAF-BLIND

STATE	COUNSELING/ GUIDANCE	TRANS-PORTATION	TECHNO-LOGICAL AIDES	INTER-PRETER SERVICES	READER SERVICES	PHYSICAL/ MENTAL RESTOR-ATION	FAMILY SERVICES	INDEP-ENDENT LIVING	MAINT-ENANCE	RESID-ENTIAL SERVICES	VOCATIONAL/ TRAINING SERVICES
ALABAMA	0	0	0	0	0	0	1	0	1	1	0
ALASKA	0	0	0	0	0	0	0	0	0	0	0
ARIZONA	0	0	0	0	0	0	0	0	0	0	0
ARKANSAS	0	0	0	0	0	0	0	0	0	0	0
CALIFORNIA	-	9	9	9	-	-	9	-	9	9	9
COLORADO	0	8	6	0	0	0	0	0	8	8	0
CONNECTICUT	3	1	1	1	0	0	1	0	0	0	3
DELAWARE	3	0	0	1	1	0	0	1	2	3	1
DISTRICT OF COLUMBIA	0	2	0	0	0	0	0	0	2	0	1
FLORIDA	0	0	0	0	0	0	0	0	0	0	0
GEORGIA	16	14	11	0	8	0	2	11	3	1	16
HAWAII	0	1	1	1	1	0	1	1	1	0	1
IDAHO	0	0	0	0	0	0	0	0	0	0	0
ILLINOIS	-	-	-	-	-	-	-	-	-	-	-
INDIANA	0	0	0	0	0	0	0	0	0	0	0
IOWA	6	0	5	0	0	5	6	0	1	0	5
KANSAS	0	0	0	0	0	2	0	0	0	1	0
KENTUCKY	1	1	1	1	1	1	1	1	1	0	1
LOUISIANA	0	0	0	0	0	0	1	0	0	0	0
MAINE	0	0	0	0	0	0	0	0	0	0	0
MARYLAND	3	3	3	1	1	2	3	1	3	2	3
MASSACHUSETTS	1	1	0	1	1	0	0	0	0	0	0
MICHIGAN	0	0	0	0	0	0	0	0	0	0	0
MINNESOTA	2	-	-	-	2	-	2	-	-	-	2
MISSISSIPPI	0	0	0	0	0	0	0	0	0	0	0
MISSOURI	0	0	0	0	0	0	0	0	0	0	0
MONTANA	2	1	0	0	0	1	0	1	0	0	2
NEBRASKA	-	-	-	-	-	-	-	-	-	-	-
NEVADA	-	-	-	-	-	-	-	-	-	-	-
NEW HAMPSHIRE	-	-	-	-	-	-	-	-	-	-	-
NEW JERSEY	0	0	0	0	0	0	0	0	0	0	0
NEW MEXICO	-	-	-	-	-	-	-	-	-	-	-
NEW YORK	19	19	19	19	19	19	19	19	19	19	19
NORTH CAROLINA	5	1	3	4	1	1	0	3	0	0	3
NORTH DAKOTA	1	1	0	1	1	0	1	1	1	1	1
OHIO	-	-	-	-	-	-	-	-	-	-	-
OKLAHOMA	1	1	0	0	0	6	0	1	1	0	1
OREGON	0	0	0	0	0	0	0	0	0	0	0
PENNSYLVANIA	0	0	2	0	0	2	0	2	0	4	0
PUERTO RICO	8	8	0	0	0	8	8	8	8	0	8
RHODE ISLAND	12	8	3	6	7	0	12	12	10	12	12
SOUTH CAROLINA	0	0	0	0	0	0	0	0	0	0	0
SOUTH DAKOTA	2	2	3	0	0	0	0	0	0	3	3
TENNESSEE	-	-	-	-	-	-	-	-	-	-	-
TEXAS	7	7	7	7	7	5	5	-	7	7	7
UTAH	3	3	3	3	0	0	1	3	3	2	3
VERMONT	0	0	0	0	0	0	0	0	0	0	0
VIRGINIA	0	2	0	0	0	1	3	2	3	1	2
WASHINGTON	-	-	-	-	-	-	-	-	-	-	-
WEST VIRGINIA	19	11	1	1	0	0	14	3	1	1	21
WISCONSIN	1	1	-	1	-	-	1	1	1	-	1
WYOMING	0	0	0	0	0	0	0	0	1	1	0
AMERICAN SAMOA	0	1	0	0	0	0	1	1	1	0	0
GUAM	0	0	0	0	0	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	0	0	0	0	0	0	0	0	0	0
U.S. & INSULAR AREAS	115	106	78	57	50	47	92	72	87	76	125
50 STATES, D.C. & P.R.	115	105	78	57	50	47	91	71	86	76	125

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF1

NUMBER OF ANTICIPATED SERVICES NEEDED BY CHILDREN 16 YEARS AND OLDER LEAVING THE EDUCATIONAL SYSTEM DURING THE 1984-85 SCHOOL YEAR BY HANDICAPPING CONDITION

DEAF-BLIND

STATE	TRANSITIONAL EMPLOYMENT SERVICES	VOCATIONAL PLACEMENT	POST EMPLOY-MENT	EVALUATION OF VR SERVICES	OTHER SERVICES	ALL SERVICES	NO SPECIAL SERVICES
ALABAMA	0	0	0	1	0	4	0
ALASKA	0	0	0	0	0	0	0
ARIZONA	0	0	0	0	0	0	0
ARKANSAS	0	0	0	0	0	0	0
CALIFORNIA	-	-	-	-	-	63	-
COLORADO	0	0	0	0	0	30	0
CONNECTICUT	1	0	0	0	0	11	0
DELAWARE	1	0	0	1	0	14	0
DISTRICT OF COLUMBIA	0	0	1	1	0	7	0
FLORIDA	0	0	0	0	0	0	0
GEORGIA	12	8	3	19	1	125	7
HAWAII	1	1	1	1	0	12	0
IDAHO	0	0	0	0	0	0	0
ILLINOIS	-	-	-	-	-	0	-
INDIANA	0	0	0	0	0	0	0
IOWA	5	3	0	6	2	44	0
KANSAS	0	0	0	0	1	4	0
KENTUCKY	1	1	1	0	0	13	0
LOUISIANA	0	0	0	0	0	1	0
MAINE	0	0	0	0	0	0	0
MARYLAND	3	3	3	3	0	37	0
MASSACHUSETTS	0	0	0	0	0	4	0
MICHIGAN	0	0	0	0	0	0	0
MINNESOTA	2	-	-	-	-	10	-
MISSISSIPPI	0	0	0	0	0	0	0
MISSOURI	0	0	0	0	0	0	0
MONTANA	1	1	1	2	0	12	0
NEBRASKA	-	-	-	-	-	-	-
NEVADA	-	-	-	-	-	-	-
NEW HAMPSHIRE	-	-	-	-	-	-	-
NEW JERSEY	0	0	0	0	0	0	0
NEW MEXICO	-	-	-	-	-	-	-
NEW YORK	19	19	19	19	0	285	0
NORTH CAROLINA	0	6	0	0	0	27	0
NORTH DAKOTA	1	1	1	1	0	13	0
OHIO	-	-	-	-	-	-	-
OKLAHOMA	0	1	1	1	0	8	0
OREGON	0	0	0	0	0	0	7
PENNSYLVANIA	0	0	0	0	0	10	0
PUERTO RICO	8	8	8	8	0	88	0
RHODE ISLAND	12	11	0	9	0	126	5
SOUTH CAROLINA	0	0	0	0	0	0	0
SOUTH DAKOTA	3	2	1	6	0	25	0
TENNESSEE	-	-	-	-	-	-	-
TEXAS	5	5	-	7	-	83	-
UTAH	3	1	3	3	0	34	0
VERMONT	0	0	0	0	0	0	0
VIRGINIA	2	2	2	2	0	22	0
WASHINGTON	-	-	-	-	-	-	-
WEST VIRGINIA	19	18	20	22	0	151	0
WISCONSIN	1	1	-	1	-	10	-
WYOMING	0	0	0	0	1	3	1
AMERICAN SAMOA	0	0	0	0	0	4	0
GUAM	0	0	0	0	0	0	0
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	0	0	0	0	0	0	0
U.S. & INSULAR AREAS	100	92	65	113	5	1,280	20
50 STATES, D.C. & P.R.	100	92	65	113	5	1,276	20

U.S. & INSULAR AREAS TOTAL MAY NOT SUM BECAUSE 1 STATE ONLY REPORTED A TOTAL FOR ALL SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EF2

Proportion of Students 16 Years of Age and Older Exiting
the Educational System in 1984-85 Anticipated to
Need Services in the 1985-86 School Year
by Handicapping Condition[a]

	Number Exiting	Number of Services Anticipated	Counseling/ Guidance	Transportation	Technological Aids	Interpreter Services	Reader Services	Physical/ Mental Restoration	Family Services	Independent Living
Mentally Retarded	58,037	168,803	30.5	17.3	2.2	.1	1.3	7.7	16.4	18.4
Speech or Language Impaired	8,205	9,680	19.1	3.1	4.1	.2	.3	2.3	10.1	6.0
Visually Handicapped	1,354	5,395	33.8	35.4	40.1	.4	39.6	5.8	18.8	19.4
Emotionally Disturbed	22,144	54,735	41.7	5.0	.6	.1	.2	14.5	32.6	17.9
Learning Disabled	90,515	127,282	27.2	1.9	3.1	.0	1.4	1.7	5.2	3.3
Orthopedically Impaired	2,553	9,413	27.7	42.8	30.8	.2	1.0	24.1	21.3	22.4
Deaf-Blind	172	1,155	58.1	56.4	44.2	31.4	27.9	24.4	47.1	36.6
Other Health Impaired	3,124	10,052	29.1	28.0	17.2	.2	.5	18.1	30.0	32.0
Hard of Hearing and Deaf	3,954	14,842	39.6	11.9	42.6	43.7	3.3	10.1	16.1	17.0
Multihandicapped	3,098	18,358	54.1	50.0	47.7	11.6	3.5	25.9	47.4	41.1
All Conditions	193,156	419,715	30.3	9.2	5.0	1.2	1.5	6.2	13.6	11.4

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a/ Anticipated Services are for 17-22 year olds.

Table EF2

Proportion of Students 16 Years of Age and Older Exiting
the Educational System in 1984-85 Anticipated to
Need Services in the 1985-86 School Year
by Handicapping Condition[a]

	Maintenance	Residential Services	Vocational/ Training	Transitional Employment Services	Vocational Placement	Post Employment	Evaluation of VR Services	Other Services
Mentally Retarded	18.8	8.3	44.1	27.9	40.0	19.0	36.8	2.0
Speech or Language Impaired	4.0	.5	16.6	8.4	22.6	5.7	13.0	2.1
Visually Handicapped	16.4	9.8	47.0	29.9	40.9	15.6	38.1	7.5
Emotionally Disturbed	5.3	8.4	33.7	17.0	30.7	11.9	26.7	.8
Learning Disabled	1.8	.6	29.6	14.4	22.3	10.1	16.9	1.0
Orthopedically Impaired	12.7	4.6	53.0	32.2	41.8	12.6	38.6	3.0
Deaf-Blind	45.9	42.4	64.5	53.5	45.9	33.7	57.0	2.3
Other Health Impaired	21.1	8.6	40.8	18.0	39.9	8.4	29.2	.8
Hard of Hearing and Deaf	13.2	2.3	47.5	22.5	43.8	15.4	42.4	4.0
Multihandicapped	35.4	39.1	57.0	44.7	55.6	39.8	37.3	2.5
All Conditions	8.8	4.8	35.3	19.6	30.3	13.4	25.3	1.5

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[a] Anticipated Services are for 17-22 year olds.

Table EG1

NUMBER OF CHILDREN 3-21 YEARS OLD IN NEED OF IMPROVED SERVICES BY HANDICAPPING CONDITION

SCHOOL YEAR 1984-85

ALL CONDITIONS

STATE	3-5 YEARS OLD	6-11 YEARS OLD	12-17 YEARS OLD	18-21 YEARS OLD	3-21 YEARS OLD
ALABAMA	1,251	15,968	16,010	3,199	36,428
ALASKA	20	62	69	15	166
ARIZONA	685	4,553	3,952	615	9,805
ARKANSAS	176	1,082	1,040	110	2,408
CALIFORNIA	-	-	-	-	-
COLORADO	2,971	0	0	2,112	5,083
CONNECTICUT	-	-	-	-	-
DELAWARE	186	719	1,078	172	2,155
DISTRICT OF COLUMBIA	45	1,077	679	315	2,116
FLORIDA	1,002	9,410	8,478	918	19,808
GEORGIA	98	509	508	9	1,124
HAWAII	55	562	545	78	1,240
IDAHO	-	371	1,479	232	2,082
ILLINOIS	-	-	-	-	-
INDIANA	2,564	1,606	2,904	355	7,429
IOWA	332	664	306	170	1,472
KANSAS	143	1,185	2,294	547	4,169
KENTUCKY	1,367	16,305	12,549	1,441	31,662
LOUISIANA	2,508	8,867	18,426	3,881	33,682
MAINE	1,886	1,607	1,537	423	5,453
MARYLAND	195	350	353	70	968
MASSACHUSETTS	240	1,825	1,973	183	4,221
MICHIGAN	0	0	0	0	0
MINNESOTA	0	0	0	0	0
MISSISSIPPI	-	920	352	8	1,280
MISSOURI	6	46	54	9	115
MONTANA	6	677	1,026	116	1,825
NEBRASKA	129	846	8,249	668	9,892
NEVADA	26	240	241	79	586
NEW HAMPSHIRE	-	-	-	-	-
NEW JERSEY	1,004	2,092	6,719	966	10,781
NEW MEXICO	262	6,743	6,506	936	14,447
NEW YORK	3,144	23,054	32,732	4,680	63,610
NORTH CAROLINA	1,147	10,574	12,710	1,553	25,984
NORTH DAKOTA	233	692	899	259	2,083
OHIO	-	3,025	2,271	1,500	6,796
OKLAHOMA	96	189	286	32	603
OREGON	116	1,175	886	58	2,235
PENNSYLVANIA	1,447	9,223	11,368	1,932	23,970
PUERTO RICO	683	2,116	16,034	8,393	27,226
RHODE ISLAND	50	500	350	0	900
SOUTH CAROLINA	1,144	6,527	7,053	1,480	16,204
SOUTH DAKOTA	35	38	0	0	73
TENNESSEE	7	43	60	14	124
TEXAS	1,447	7,376	4,755	417	13,995
UTAH	0	0	0	0	0
VERMONT	1,412	730	143	10	2,295
VIRGINIA	937	4,105	4,196	422	9,660
WASHINGTON	389	5,974	350	30	6,743
WEST VIRGINIA	920	5,981	5,989	1,233	14,123
WISCONSIN	2,082	7,563	7,523	944	18,112
WYOMING	67	480	476	65	1,088
AMERICAN SAMOA	3	200	75	-	278
GUAM	127	1,031	572	151	1,881
NORTHERN MARIANAS	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	98	592	208	60	958
U.S. & INSULAR AREAS	32,741	169,474	206,263	40,780	449,258
50 STATES, D.C. & P.R.	32,513	167,651	205,408	40,569	446,141

DATA AS OF OCTOBER 1, 1986.

Table EG1

NUMBER OF CHILDREN 3-21 YEARS OLD IN NEED OF IMPROVED SERVICES BY HANDICAPPING CONDITION

SCHOOL YEAR 1984-85

LEARNING DISABLED

STATE	3-5 YEARS OLD	6-11 YEARS OLD	12-17 YEARS OLD	18-21 YEARS OLD	3-21 YEARS OLD
ALABAMA	56	3,818	5,470	702	10,046
ALASKA	0	25	30	5	60
ARIZONA	51	1,863	2,042	259	4,215
ARKANSAS	3	434	590	47	1,074
CALIFORNIA	-	-	-	-	-
COLORADO	409	0	0	791	1,200
CONNECTICUT	-	-	-	-	-
DELAWARE	62	206	365	93	726
DISTRICT OF COLUMBIA	0	543	275	99	917
FLORIDA	16	3,601	4,320	268	8,205
GEORGIA	0	37	37	0	74
HAWAII	5	279	427	38	749
IDAHO	-	0	860	138	998
ILLINOIS	-	-	-	-	-
INDIANA	28	259	710	46	1,043
IOWA	0	0	0	0	0
KANSAS	22	429	1,000	139	1,590
KENTUCKY	13	3,494	5,279	493	9,279
LOUISIANA	123	4,680	11,380	1,260	17,443
MAINE	340	284	311	160	1,095
MARYLAND	3	85	86	7	181
MASSACHUSETTS	85	644	696	65	1,490
MICHIGAN	0	0	0	0	0
MINNESOTA	0	0	0	0	0
MISSISSIPPI	-	124	170	0	294
MISSOURI	0	0	0	0	0
MONTANA	0	600	700	50	1,350
NEBRASKA	0	0	4,290	0	4,290
NEVADA	5	87	115	25	232
NEW HAMPSHIRE	-	-	-	-	-
NEW JERSEY	87	897	3,877	463	5,324
NEW MEXICO	29	2,239	3,274	235	5,777
NEW YORK	195	9,060	12,328	962	22,545
NORTH CAROLINA	44	3,337	5,379	460	9,220
NORTH DAKOTA	20	273	484	92	869
OHIO	-	2,300	1,700	950	4,950
OKLAHOMA	0	90	200	20	310
OREGON	0	208	145	0	353
PENNSYLVANIA	153	2,314	4,663	487	7,617
PUERTO RICO	0	0	1,975	436	2,411
RHODE ISLAND	50	400	200	0	650
SOUTH CAROLINA	21	1,892	2,746	329	4,988
SOUTH DAKOTA	0	0	0	0	0
TENNESSEE	1	9	23	7	40
TEXAS	273	3,896	3,353	238	7,760
UTAH	0	0	0	0	0
VERMONT	88	0	0	0	88
VIRGINIA	119	1,831	2,124	148	4,222
WASHINGTON	0	3,510	274	12	3,796
WEST VIRGINIA	66	1,804	2,613	417	4,900
WISCONSIN	256	2,794	3,979	364	7,393
WYOMING	23	243	261	32	559
AMERICAN SAMOA	0	0	0	-	0
GUAM	0	519	302	32	853
NORTHERN MARIANAS	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	21	116	72	3	212
U.S. & INSULAR AREAS	2,667	59,224	89,125	10,372	161,388
50 STATES, D.C. & P.R.	2,646	58,589	88,751	10,337	160,323

DATA AS OF OCTOBER 1, 1986.

Table EG1

NUMBER OF CHILDREN 3-21 YEARS OLD IN NEED OF IMPROVED SERVICES BY HANDICAPPING CONDITION

SCHOOL YEAR 1984-85

SPEECH IMPAIRED

STATE	3-5 YEARS OLD	6-11 YEARS OLD	12-17 YEARS OLD	18-21 YEARS OLD	3-21 YEARS OLD
ALABAMA	845	6,237	969	56	8,107
ALASKA	10	20	5	0	35
ARIZONA	328	1,316	700	41	2,385
ARKANSAS	104	346	36	1	487
CALIFORNIA	-	-	-	-	-
COLORADO	1,082	0	0	43	1,125
CONNECTICUT	-	-	-	-	-
DELAWARE	70	251	68	0	389
DISTRICT OF COLUMBIA	2	41	36	27	106
FLORIDA	763	2,351	676	15	3,805
GEORGIA	74	279	279	0	632
HAWAII	30	181	25	1	237
IDAHO	-	284	0	0	284
ILLINOIS	-	-	-	-	-
INDIANA	2,200	322	37	5	2,564
IOWA	0	0	0	0	0
KANSAS	60	381	61	30	532
KENTUCKY	1,225	8,963	821	16	11,025
LOUISIANA	1,020	1,443	459	80	3,002
MAINE	634	311	220	54	1,219
MARYLAND	64	82	83	6	235
MASSACHUSETTS	55	420	454	42	971
MICHIGAN	0	0	0	0	0
MINNESOTA	0	0	0	0	0
MISSISSIPPI	-	750	146	0	896
MISSOURI	0	0	0	0	0
MONTANA	0	0	0	0	0
NEBRASKA	0	0	0	0	0
NEVADA	15	92	70	0	177
NEW HAMPSHIRE	-	-	-	-	-
NEW JERSEY	101	810	280	8	1,199
NEW MEXICO	142	2,783	1,229	130	4,284
NEW YORK	560	1,319	289	8	2,176
NORTH CAROLINA	672	3,098	653	16	4,439
NORTH DAKOTA	80	207	37	19	343
OHIO	-	0	0	0	0
OKLAHOMA	80	81	0	0	161
OREGON	100	650	166	0	916
PENNSYLVANIA	530	2,717	228	4	3,479
PUERTO RICO	0	0	0	0	0
RHODE ISLAND	0	0	0	0	0
SOUTH CAROLINA	640	2,079	425	32	3,176
SOUTH DAKOTA	0	0	0	0	0
TENNESSEE	6	13	1	1	21
TEXAS	994	2,570	413	2	3,979
UTAH	0	0	0	0	0
VERMONT	1,207	695	108	10	2,020
VIRGINIA	666	1,259	955	10	2,890
WASHINGTON	105	1,613	14	0	1,732
WEST VIRGINIA	607	2,662	529	140	3,938
WISCONSIN	1,353	2,656	381	11	4,401
WYOMING	6	29	7	0	42
AMERICAN SAMOA	0	50	25	-	75
GUAM	45	123	26	0	194
NORTHERN MARIANAS	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	37	320	27	8	392
U.S. & INSULAR AREAS	16,512	49,804	10,938	816	78,070
50 STATES, D.C. & P.R.	16,430	49,311	10,860	808	77,409

DATA AS OF OCTOBER 1, 1986.

Table EG1

NUMBER OF CHILDREN 3-21 YEARS OLD IN NEED OF IMPROVED SERVICES BY HANDICAPPING CONDITION

SCHOOL YEAR 1984-85

MENTALLY RETARDED

STATE	3-5 YEARS OLD	6-11 YEARS OLD	12-17 YEARS OLD	18-21 YEARS OLD	3-21 YEARS OLD
ALABAMA	220	3,911	6,975	1,954	13,060
ALASKA	0	0	0	5	5
ARIZONA	101	280	345	201	927
ARKANSAS	37	254	371	57	719
CALIFORNIA	-	-	-	-	-
COLORADO	538	0	0	583	1,121
CONNECTICUT	-	-	-	-	-
DELAWARE	22	69	183	32	306
DISTRICT OF COLUMBIA	24	253	166	123	566
FLORIDA	130	879	1,368	438	2,815
GEORGIA	9	68	68	4	149
HAWAII	3	42	24	26	95
IDAHO	-	0	471	78	549
ILLINOIS	-	-	-	-	-
INDIANA	125	684	1,626	248	2,683
IOWA	0	0	0	0	0
KANSAS	19	81	442	177	719
KENTUCKY	66	2,899	5,272	801	9,038
LOUISIANA	676	798	2,949	1,732	6,155
MAINE	309	210	185	24	728
MARYLAND	17	60	60	25	162
MASSACHUSETTS	51	387	418	39	895
MICHIGAN	0	0	0	0	0
MINNESOTA	0	0	0	0	0
MISSISSIPPI	-	42	30	7	79
MISSOURI	0	0	0	0	0
MONTANA	0	0	200	60	260
NEBRASKA	0	0	2,441	568	3,009
NEVADA	0	3	1	15	19
NEW HAMPSHIRE	-	-	-	-	-
NEW JERSEY	6	46	526	209	787
NEW MEXICO	38	357	525	402	1,322
NEW YORK	337	1,943	3,406	1,249	6,935
NORTH CAROLINA	145	2,133	4,189	756	7,223
NORTH DAKOTA	69	79	165	98	411
OHIO	-	500	300	100	900
OKLAHOMA	0	10	70	10	90
OREGON	0	0	125	58	183
PENNSYLVANIA	331	2,431	3,787	820	7,369
PUERTO RICO	0	0	9,797	3,025	12,822
RHODE ISLAND	0	0	100	0	100
SOUTH CAROLINA	385	1,532	2,886	941	5,744
SOUTH DAKOTA	0	0	0	0	0
TENNESSEE	0	15	12	2	29
TEXAS	63	387	495	104	1,049
UTAH	0	0	0	0	0
VERMONT	81	0	0	0	81
VIRGINIA	56	579	572	200	1,407
WASHINGTON	269	418	24	6	717
WEST VIRGINIA	100	786	1,909	514	3,309
WISCONSIN	203	906	1,430	394	2,933
WYOMING	3	18	44	19	84
AMERICAN SAMOA	0	0	0	-	0
GUAM	49	285	181	90	605
NORTHERN MARIANAS	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	14	43	45	36	138
U.S. & INSULAR AREAS	4,496	23,388	54,183	16,230	98,297
50 STATES, D.C. & P.R.	4,433	23,060	53,957	16,104	97,554

DATA AS OF OCTOBER 1, 1986.

Table EG1

NUMBER OF CHILDREN 3-21 YEARS OLD IN NEED OF IMPROVED SERVICES BY HANDICAPPING CONDITION

SCHOOL YEAR 1984-85

EMOTIONALLY DISTURBED

STATE	3-5 YEARS OLD	6-11 YEARS OLD	12-17 YEARS OLD	18-21 YEARS OLD	3-21 YEARS OLD
ALABAMA	32	1,167	1,868	299	3,366
ALASKA	10	15	30	5	60
ARIZONA	12	668	562	84	1,326
ARKANSAS	1	10	12	1	24
CALIFORNIA	-	-	-	-	-
COLORADO	90	0	0	346	436
CONNECTICUT	-	-	-	-	-
DELAWARE	7	168	426	42	643
DISTRICT OF COLUMBIA	0	166	114	26	306
FLORIDA	35	2,329	1,955	148	4,467
GEORGIA	9	57	57	0	123
HAWAII	1	16	30	3	50
IDAHO	-	87	148	16	251
ILLINOIS	-	-	-	-	-
INDIANA	10	268	443	33	754
IOWA	0	0	0	0	0
KANSAS	15	196	587	142	940
KENTUCKY	7	407	732	32	1,178
LOUISIANA	41	925	2,222	212	3,400
MAINE	240	307	211	81	839
MARYLAND	0	5	5	2	12
MASSACHUSETTS	33	250	270	25	578
MICHIGAN	0	0	0	0	0
MINNESOTA	0	0	0	0	0
MISSISSIPPI	-	1	3	0	4
MISSOURI	3	39	49	9	100
MONTANA	0	40	80	0	120
NEBRASKA	0	796	1,295	0	2,091
NEVADA	0	51	55	20	126
NEW HAMPSHIRE	-	-	-	-	-
NEW JERSEY	27	138	1,639	185	1,989
NEW MEXICO	8	768	996	79	1,851
NEW YORK	465	5,642	10,633	1,216	17,956
NORTH CAROLINA	17	1,071	1,581	81	2,750
NORTH DAKOTA	14	81	154	34	283
OHIO	-	30	50	40	120
OKLAHOMA	0	2	16	2	20
OREGON	0	292	200	0	492
PENNSYLVANIA	170	1,228	2,021	311	3,730
PUERTO RICO	78	464	519	168	1,229
RHODE ISLAND	0	100	50	0	150
SOUTH CAROLINA	24	784	779	120	1,707
SOUTH DAKOTA	0	0	0	0	0
TENNESSEE	0	2	21	4	27
TEXAS	2	175	197	7	381
UTAH	0	0	0	0	0
VERMONT	3	0	0	0	3
VIRGINIA	18	288	362	29	697
WASHINGTON	0	209	23	10	242
WEST VIRGINIA	27	426	579	21	1,053
WISCONSIN	119	895	1,531	129	2,674
WYOMING	13	96	120	14	243
AMERICAN SAMOA	0	0	0	-	0
GUAM	0	33	16	0	49
NORTHERN MARIANAS	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	7	74	48	11	140
U.S. & INSULAR AREAS	1,538	20,766	32,689	3,987	58,980
50 STATES, D.C. & P.R.	1,531	20,659	32,625	3,976	58,791

DATA AS OF OCTOBER 1, 1986.

Table EG1

NUMBER OF CHILDREN 3-21 YEARS OLD IN NEED OF IMPROVED SERVICES BY HANDICAPPING CONDITION

SCHOOL YEAR 1984-85

HARD OF HEARING & DEAF

STATE	3-5 YEARS OLD	6-11 YEARS OLD	12-17 YEARS OLD	18-21 YEARS OLD	3-21 YEARS OLD
ALABAMA	28	156	141	35	360
ALASKA	0	2	4	0	6
ARIZONA	22	49	39	1	111
ARKANSAS	5	12	11	3	31
CALIFORNIA	-	-	-	-	-
COLORADO	83	0	0	85	168
CONNECTICUT	-	-	-	-	-
DELAWARE	0	1	3	0	4
DISTRICT OF COLUMBIA	0	12	20	0	32
FLORIDA	19	65	41	11	136
GEORGIA	3	20	20	2	45
HAWAII	3	8	12	6	29
IDAHO	-	0	0	0	0
ILLINOIS	-	-	-	-	-
INDIANA	130	20	27	10	187
IOWA	0	0	0	0	0
KANSAS	5	83	142	20	250
KENTUCKY	13	122	86	22	243
LOUISIANA	232	367	484	185	1,268
MAINE	46	90	86	10	232
MARYLAND	4	13	13	2	32
MASSACHUSETTS	3	26	28	2	59
MICHIGAN	0	0	0	0	0
MINNESOTA	0	0	0	0	0
MISSISSIPPI	-	0	0	0	0
MISSOURI	0	0	0	0	0
MONTANA	0	1	10	0	11
NEBRASKA	52	0	198	34	284
NEVADA	0	1	0	10	11
NEW HAMPSHIRE	-	-	-	-	-
NEW JERSEY	3	25	31	9	68
NEW MEXICO	4	99	88	40	231
NEW YORK	93	235	306	132	766
NORTH CAROLINA	152	363	345	97	957
NORTH DAKOTA	9	17	12	4	42
OHIO	-	0	0	0	0
OKLAHOMA	2	0	0	0	2
OREGON	0	0	0	0	0
PENNSYLVANIA	88	226	335	132	781
PUERTO RICO	60	289	866	1,121	2,336
RHODE ISLAND	0	0	0	0	0
SOUTH CAROLINA	21	95	77	10	209
SOUTH DAKOTA	20	18	0	0	38
TENNESSEE	0	0	2	0	2
TEXAS	30	58	44	18	150
UTAH	0	0	0	0	0
VERMONT	5	0	0	0	5
VIRGINIA	12	42	54	5	113
WASHINGTON	0	15	7	1	23
WEST VIRGINIA	38	84	130	57	309
WISCONSIN	45	99	61	15	220
WYOMING	21	86	33	0	140
AMERICAN SAMOA	3	0	0	-	3
GUAM	7	9	9	7	32
NORTHERN MARIANAS	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	2	5	0	0	7
U.S. & INSULAR AREAS	1,263	2,813	3,765	2,092	9,933
50 STATES, D.C. & P.R.	1,251	2,799	3,756	2,085	9,891

DATA AS OF OCTOBER 1, 1986.

Table EG1

NUMBER OF CHILDREN 3-21 YEARS OLD IN NEED OF IMPROVED SERVICES BY HANDICAPPING CONDITION

SCHOOL YEAR 1984-85

MULTIHANDICAPPED

STATE	3-5 YEARS OLD	6-11 YEARS OLD	12-17 YEARS OLD	18-21 YEARS OLD	3-21 YEARS OLD
ALABAMA	50	306	236	73	665
ALASKA	0	0	0	0	0
ARIZONA	26	107	76	22	231
ARKANSAS	7	13	9	1	30
CALIFORNIA	-	-	-	-	-
COLORADO	535	0	0	168	703
CONNECTICUT	-	-	-	-	-
DELAWARE	0	3	5	1	9
DISTRICT OF COLUMBIA	14	19	35	8	76
FLORIDA	-	-	-	-	-
GEORGIA	0	0	0	0	0
HAWAII	5	10	7	1	23
IDAHO	-	0	0	0	0
ILLINOIS	-	-	-	-	-
INDIANA	55	25	26	7	113
IOWA	85	216	6	128	435
KANSAS	6	5	28	24	63
KENTUCKY	18	212	147	48	425
LOUISIANA	190	235	347	221	993
MAINE	111	92	81	61	345
MARYLAND	60	68	68	20	216
MASSACHUSETTS	5	40	43	4	92
MICHIGAN	0	0	0	0	0
MINNESOTA	0	0	0	0	0
MISSISSIPPI	-	0	2	0	2
MISSOURI	3	7	5	0	15
MONTANA	0	25	30	6	61
NEBRASKA	0	0	0	0	0
NEVADA	2	5	0	1	8
NEW HAMPSHIRE	-	-	-	-	-
NEW JERSEY	771	134	222	58	1,185
NEW MEXICO	16	236	246	29	527
NEW YORK	766	1,318	1,378	482	3,944
NORTH CAROLINA	46	230	311	105	692
NORTH DAKOTA	33	10	19	6	68
OHIO	-	120	196	400	716
OKLAHOMA	8	2	0	0	10
OREGON	0	0	0	0	0
PENNSYLVANIA	26	35	62	58	181
PUERTO RICO	129	891	1,034	827	2,881
RHODE ISLAND	0	0	0	0	0
SOUTH CAROLINA	3	23	39	16	81
SOUTH DAKOTA	9	12	0	0	21
TENNESSEE	0	3	0	0	3
TEXAS	21	58	29	5	113
UTAH	0	0	0	0	0
VERMONT	0	0	0	0	0
VIRGINIA	47	62	71	24	204
WASHINGTON	0	30	5	1	36
WEST VIRGINIA	0	0	0	0	0
WISCONSIN	41	63	37	15	156
WYOMING	1	0	3	0	4
AMERICAN SAMOA	0	0	0	-	0
GUAM	15	47	28	16	106
NORTHERN MARIANAS	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	7	16	12	0	35
U.S. & INSULAR AREAS	3,111	4,678	4,843	2,836	15,468
50 STATES, D.C. & P.R.	3,089	4,615	4,803	2,820	15,327

DATA AS OF OCTOBER 1, 1986.

Table EG1

NUMBER OF CHILDREN 3-21 YEARS OLD IN NEED OF IMPROVED SERVICES BY HANDICAPPING CONDITION

SCHOOL YEAR 1984-85

ORTHOPEDICALLY IMPAIRED

STATE	3-5 YEARS OLD	6-11 YEARS OLD	12-17 YEARS OLD	18-21 YEARS OLD	3-21 YEARS OLD
ALABAMA	11	165	127	28	331
ALASKA	0	0	0	0	0
ARIZONA	32	107	50	1	190
ARKANSAS	9	3	2	0	14
CALIFORNIA	-	-	-	-	-
COLORADO	186	0	0	62	248
CONNECTICUT	-	-	-	-	-
DELAWARE	0	21	26	3	50
DISTRICT OF COLUMBIA	2	9	9	2	22
FLORIDA	38	135	66	35	274
GEORGIA	2	19	19	1	41
HAWAII	7	23	15	2	47
IDAHO	-	0	0	0	0
ILLINOIS	-	-	-	-	-
INDIANA	10	20	22	4	56
IOWA	247	448	300	42	1,037
KANSAS	9	8	3	0	20
KENTUCKY	10	85	82	9	186
LOUISIANA	140	162	207	43	552
MAINE	116	211	301	15	643
MARYLAND	31	18	19	7	75
MASSACHUSETTS	3	20	22	2	47
MICHIGAN	0	0	0	0	0
MINNESOTA	0	0	0	0	0
MISSISSIPPI	-	2	1	1	4
MISSOURI	0	0	0	0	0
MONTANA	6	10	5	0	21
NEBRASKA	50	50	25	0	125
NEVADA	0	0	0	0	0
NEW HAMPSHIRE	-	-	-	-	-
NEW JERSEY	7	24	61	19	111
NEW MEXICO	14	200	90	15	319
NEW YORK	207	256	238	47	748
NORTH CAROLINA	29	136	100	16	281
NORTH DAKOTA	5	14	19	2	40
OHIO	-	75	25	10	110
OKLAHOMA	1	0	0	0	1
OREGON	0	25	25	0	50
PENNSYLVANIA	112	121	150	68	451
PUERTO RICO	135	144	727	1,214	2,220
RHODE ISLAND	0	0	0	0	0
SOUTH CAROLINA	28	64	69	16	177
SOUTH DAKOTA	0	0	0	0	0
TENNESSEE	0	0	0	0	0
TEXAS	32	77	101	35	245
UTAH	0	0	0	0	0
VERMONT	22	0	0	0	22
VIRGINIA	12	17	23	3	55
WASHINGTON	15	60	1	0	76
WEST VIRGINIA	38	105	83	29	255
WISCONSIN	42	77	37	6	162
WYOMING	0	5	5	0	10
AMERICAN SAMOA	0	0	0	-	0
GUAM	9	8	4	3	24
NORTHERN MARIANAS	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	2	8	0	0	10
U.S. & INSULAR AREAS	1,619	2,932	3,059	1,740	9,350
50 STATES, D.C. & P.R.	1,608	2,916	3,055	1,737	9,316

DATA AS OF OCTOBER 1, 1986.

Table EG1

NUMBER OF CHILDREN 3-21 YEARS OLD IN NEED OF IMPROVED SERVICES BY HANDICAPPING CONDITION

SCHOOL YEAR 1984-85

OTHER HEALTH IMPAIRED

STATE	3-5 YEARS OLD	6-11 YEARS OLD	12-17 YEARS OLD	18-21 YEARS OLD	3-21 YEARS OLD
ALABAMA	2	116	140	39	297
ALASKA	0	0	0	0	0
ARIZONA	73	132	109	5	319
ARKANSAS	5	4	3	0	12
CALIFORNIA	-	-	-	-	-
COLORADO	0	0	0	0	0
CONNECTICUT	-	-	-	-	-
DELAWARE	0	0	2	0	2
DISTRICT OF COLUMBIA	0	12	16	13	41
FLORIDA	0	24	23	3	50
GEORGIA	0	18	18	1	37
HAWAII	0	0	0	0	0
IDAHO	-	0	0	0	0
ILLINOIS	-	-	-	-	-
INDIANA	1	2	5	0	8
IOWA	-	-	-	-	-
KANSAS	4	2	5	0	11
KENTUCKY	9	42	57	8	116
LOUISIANA	47	105	161	18	331
MAINE	60	70	107	17	254
MARYLAND	14	19	19	1	53
MASSACHUSETTS	3	25	28	3	59
MICHIGAN	0	0	0	0	0
MINNESOTA	0	0	0	0	0
MISSISSIPPI	-	0	0	0	0
MISSOURI	0	0	0	0	0
MONTANA	0	1	1	0	2
NEBRASKA	-	-	-	-	-
NEVADA	4	0	0	0	4
NEW HAMPSHIRE	-	-	-	-	-
NEW JERSEY	0	11	46	6	63
NEW MEXICO	7	28	29	1	65
NEW YORK	447	3,083	3,873	484	7,887
NORTH CAROLINA	31	130	101	16	278
NORTH DAKOTA	2	10	2	0	14
OHIO	-	0	0	0	0
OKLAHOMA	4	0	0	0	4
OREGON	0	0	125	0	125
PENNSYLVANIA	-	-	-	-	-
PUERTO RICO	211	170	345	375	1,101
RHODE ISLAND	0	0	0	0	0
SOUTH CAROLINA	11	20	9	5	45
SOUTH DAKOTA	0	0	0	0	0
TENNESSEE	0	1	0	0	1
TEXAS	22	122	100	6	250
UTAH	0	0	0	0	0
VERMONT	3	0	0	0	3
VIRGINIA	2	8	12	1	23
WASHINGTON	0	119	1	0	120
WEST VIRGINIA	17	47	70	29	163
WISCONSIN	13	38	41	6	98
WYOMING	0	0	1	0	1
AMERICAN SAMOA	0	0	0	-	0
GUAM	2	1	0	0	3
NORTHERN MARIANAS	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	7	4	0	0	11
U.S. & INSULAR AREAS	1,001	4,364	5,449	1,037	11,851
50 STATES, D.C. & P.R.	992	4,359	5,449	1,037	11,837

DATA AS OF OCTOBER 1, 1986.

Table EG1

NUMBER OF CHILDREN 3-21 YEARS OLD IN NEED OF IMPROVED SERVICES BY HANDICAPPING CONDITION

SCHOOL YEAR 1984-85

VISUALLY HANDICAPPED

STATE	3-5 YEARS OLD	6-11 YEARS OLD	12-17 YEARS OLD	18-21 YEARS OLD	3-21 YEARS OLD
ALABAMA	7	91	75	11	184
ALASKA	0	0	0	0	0
ARIZONA	16	30	27	0	73
ARKANSAS	3	4	5	0	12
CALIFORNIA	-	-	-	-	-
COLORADO	32	0	0	20	52
CONNECTICUT	-	-	-	-	-
DELAWARE	25	0	0	1	26
DISTRICT OF COLUMBIA	1	21	2	2	26
FLORIDA	1	25	29	0	55
GEORGIA	1	11	10	1	23
HAWAII	1	3	4	1	9
IDAHO	-	0	0	0	0
ILLINOIS	-	-	-	-	-
INDIANA	4	5	8	2	19
IOWA	0	0	0	0	0
KANSAS	1	0	26	15	42
KENTUCKY	6	81	73	12	172
LOUISIANA	36	144	205	45	430
MAINE	26	30	32	0	88
MARYLAND	2	0	0	0	2
MASSACHUSETTS	2	11	12	1	26
MICHIGAN	0	0	0	0	0
MINNESOTA	0	0	0	0	0
MISSISSIPPI	-	1	0	0	1
MISSOURI	0	0	0	0	0
MONTANA	0	0	0	0	0
NEBRASKA	27	0	0	66	93
NEVADA	0	1	0	8	9
NEW HAMPSHIRE	-	-	-	-	-
NEW JERSEY	2	7	37	9	55
NEW MEXICO	4	26	16	3	49
NEW YORK	51	174	243	49	517
NORTH CAROLINA	7	68	33	2	110
NORTH DAKOTA	0	1	7	2	10
OHIO	-	0	0	0	0
OKLAHOMA	1	4	0	0	5
OREGON	8	0	100	0	108
PENNSYLVANIA	27	137	108	47	319
PUERTO RICO	70	158	771	1,227	2,226
RHODE ISLAND	0	0	0	0	0
SOUTH CAROLINA	11	37	23	5	76
SOUTH DAKOTA	6	8	0	0	14
TENNESSEE	0	0	1	0	1
TEXAS	9	32	23	1	65
UTAH	0	0	0	0	0
VERMONT	3	35	35	0	73
VIRGINIA	5	19	23	2	49
WASHINGTON	0	0	1	0	1
WEST VIRGINIA	27	61	73	18	179
WISCONSIN	10	33	25	3	71
WYOMING	0	2	2	0	4
AMERICAN SAMOA	0	0	0	-	0
GUAM	0	5	5	0	10
NORTHERN MARIANAS	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	1	6	4	2	13
U.S. & INSULAR AREAS	433	1,271	2,038	1,555	5,297
50 STATES, D.C. & P.R.	432	1,260	2,029	1,553	5,274

DATA AS OF OCTOBER 1, 1986.

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Table EG1

NUMBER OF CHILDREN 3-21 YEARS OLD IN NEED OF IMPROVED SERVICES BY HANDICAPPING CONDITION

SCHOOL YEAR 1984-85

DEAF-BLIND

STATE	3-5 YEARS OLD	6-11 YEARS OLD	12-17 YEARS OLD	18-21 YEARS OLD	3-21 YEARS OLD
ALABAMA	0	1	9	2	12
ALASKA	0	0	0	0	0
ARIZONA	24	1	2	1	28
ARKANSAS	2	2	1	0	5
CALIFORNIA	–	–	–	–	–
COLORADO	16	0	0	14	30
CONNECTICUT	–	–	–	–	–
DELAWARE	0	0	0	0	0
DISTRICT OF COLUMBIA	2	1	6	15	24
FLORIDA	0	1	0	0	1
GEORGIA	0	0	0	0	0
HAWAII	0	0	1	0	1
IDAHO	–	0	0	0	0
ILLINOIS	–	–	–	–	–
INDIANA	1	1	0	0	2
IOWA	0	0	0	0	0
KANSAS	2	0	0	0	2
KENTUCKY	0	0	0	0	0
LOUISIANA	3	8	12	5	28
MAINE	4	2	3	1	10
MARYLAND	0	0	0	0	0
MASSACHUSETTS	0	2	2	0	4
MICHIGAN	–	–	–	–	–
MINNESOTA	0	0	0	0	0
MISSISSIPPI	–	0	0	0	0
MISSOURI	0	0	0	0	0
MONTANA	0	0	0	0	0
NEBRASKA	–	–	–	–	–
NEVADA	0	0	0	0	0
NEW HAMPSHIRE	–	–	–	–	–
NEW JERSEY	0	0	0	0	0
NEW MEXICO	0	7	13	2	22
NEW YORK	23	24	38	51	136
NORTH CAROLINA	4	8	18	4	34
NORTH DAKOTA	1	0	0	2	3
OHIO	–	0	0	0	0
OKLAHOMA	0	0	0	0	0
OREGON	8	0	0	0	8
PENNSYLVANIA	10	14	14	5	43
PUERTO RICO	0	0	0	0	0
RHODE ISLAND	0	0	0	0	0
SOUTH CAROLINA	0	1	0	0	1
SOUTH DAKOTA	0	0	0	0	0
TENNESSEE	0	0	0	0	0
TEXAS	1	1	0	1	3
UTAH	0	0	0	0	0
VERMONT	0	0	0	0	0
VIRGINIA	0	0	0	0	0
WASHINGTON	0	0	0	0	0
WEST VIRGINIA	0	6	3	8	17
WISCONSIN	0	2	1	1	4
WYOMING	0	1	0	0	1
AMERICAN SAMOA	0	0	0	–	0
GUAM	0	1	1	3	5
NORTHERN MARIANAS	–	–	–	–	–
TRUST TERRITORIES	–	–	–	–	–
VIRGIN ISLANDS	–	–	–	–	–
BUR. OF INDIAN AFFAIRS	0	0	0	0	0
U.S. & INSULAR AREAS	101	84	124	115	424
50 STATES, D.C. & P.R.	101	83	123	112	419

DATA AS OF OCTOBER 1, 1986.

Table EH1

ESTIMATED RESIDENT POPULATIONS BY STATE FOR 3-21 YEAR OLDS

STATE	NUMBER			CHANGE IN NUMBER		PERCENT CHANGE IN NUMBER	
	1976-77	1984-85	1985-86	1985-86 - 1976-77	1985-86 - 1984-85	1985-86 - 1976-77	1985-86 - 1984-85
ALABAMA	1,276,000	1,208,000	1,213,000	-63,000	5,000	-4.94	0.41
ALASKA	171,000	168,000	170,000	-1,000	2,000	-0.58	1.19
ARIZONA	788,000	893,000	917,000	129,000	24,000	16.37	2.69
ARKANSAS	704,000	699,000	698,000	-6,000	-1,000	-0.85	-0.14
CALIFORNIA	7,092,000	7,145,000	7,200,000	108,000	55,000	1.52	0.77
COLORADO	900,000	920,000	910,000	10,000	-10,000	1.11	-1.09
CONNECTICUT	1,021,000	850,000	844,000	-177,000	-6,000	-17.34	-0.71
DELAWARE	205,000	177,000	175,000	-30,000	-2,000	-14.63	-1.13
DISTRICT OF COLUMBIA	227,000	157,000	141,000	-86,000	-16,000	-37.89	-10.19
FLORIDA	2,525,000	2,726,000	2,757,000	232,000	31,000	9.19	1.14
GEORGIA	1,778,000	1,807,000	1,810,000	32,000	3,000	1.80	0.17
HAWAII	321,000	312,000	309,000	-12,000	-3,000	-3.74	-0.96
IDAHO	297,000	327,000	333,000	36,000	6,000	12.12	1.83
ILLINOIS	3,802,000	3,351,000	3,316,000	-486,000	-35,000	-12.78	-1.04
INDIANA	1,854,000	1,660,000	1,633,000	-221,000	-27,000	-11.92	-1.63
IOWA	970,000	841,000	833,000	-137,000	-8,000	-14.12	-0.95
KANSAS	763,000	700,000	696,000	-67,000	-4,000	-8.78	-0.57
KENTUCKY	1,181,000	1,128,000	1,115,000	-66,000	-13,000	-5.59	-1.15
LOUISIANA	1,444,000	1,434,000	1,427,000	-17,000	-7,000	-1.18	-0.49
MAINE	368,000	338,000	332,000	-36,000	-6,000	-9.78	-1.78
MARYLAND	1,437,000	1,228,000	1,216,000	-221,000	-12,000	-15.38	-0.98
MASSACHUSETTS	1,930,000	1,576,000	1,533,000	-397,000	-43,000	-20.57	-2.73
MICHIGAN	3,267,000	2,743,000	2,711,000	-556,000	-32,000	-17.02	-1.17
MINNESOTA	1,393,000	1,219,000	1,213,000	-180,000	-6,000	-12.92	-0.49
MISSISSIPPI	882,000	848,000	850,000	-32,000	2,000	-3.63	0.24
MISSOURI	1,587,000	1,436,000	1,422,000	-165,000	-14,000	-10.40	-0.97
MONTANA	265,000	244,000	245,000	-20,000	1,000	-7.55	0.41
NEBRASKA	528,000	474,000	469,000	-59,000	-5,000	-11.17	-1.05
NEVADA	211,000	251,000	237,000	26,000	-14,000	12.32	-5.58
NEW HAMPSHIRE	281,000	278,000	278,000	-3,000	0	-1.07	0.00
NEW JERSEY	2,398,000	2,050,000	2,063,000	-335,000	13,000	-13.97	0.63
NEW MEXICO	447,000	457,000	463,000	16,000	6,000	3.58	1.31
NEW YORK	5,814,000	4,894,000	4,815,000	-999,000	-79,000	-17.18	-1.61
NORTH CAROLINA	1,883,000	1,799,000	1,776,000	-107,000	-23,000	-5.68	-1.28
NORTH DAKOTA	230,000	206,000	206,000	-24,000	0	-10.43	0.00
OHIO	3,687,000	3,153,000	3,105,000	-582,000	-48,000	-15.79	-1.52
OKLAHOMA	906,000	968,000	967,000	61,000	-1,000	6.73	-0.10
OREGON	752,000	749,000	747,000	-5,000	-2,000	-0.66	-0.27
PENNSYLVANIA	3,793,000	3,217,000	3,177,000	-616,000	-40,000	-16.24	-1.24
PUERTO RICO	-	-	-	-	-	-	-
RHODE ISLAND	308,000	258,000	253,000	-55,000	-5,000	-17.86	-1.94
SOUTH CAROLINA	1,035,000	1,021,000	1,014,000	-21,000	-7,000	-2.03	-0.69
SOUTH DAKOTA	241,000	216,000	214,000	-27,000	-2,000	-11.20	-0.93
TENNESSEE	1,413,000	1,369,000	1,358,000	-55,000	-11,000	-3.89	-0.80
TEXAS	4,446,000	4,953,000	4,996,000	550,000	43,000	12.37	0.87
UTAH	481,000	622,000	605,000	124,000	-17,000	25.78	-2.73
VERMONT	168,000	156,000	153,000	-15,000	-3,000	-8.93	-1.92
VIRGINIA	1,754,000	1,620,000	1,601,000	-153,000	-19,000	-8.72	-1.17
WASHINGTON	1,217,000	1,236,000	1,241,000	24,000	5,000	1.97	0.40
WEST VIRGINIA	592,000	569,000	567,000	-25,000	-2,000	-4.22	-0.35
WISCONSIN	1,613,000	1,403,000	1,391,000	-222,000	-12,000	-13.76	-0.86
WYOMING	136,000	640,000	162,000	26,000	-478,000	19.12	-74.69
AMERICAN SAMOA	-	-	-	-	-	-	-
GUAM	-	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	-	-	-	-	-	-	-
U.S. & INSULAR AREAS	72,782,000	68,694,000	67,877,000	-4,905,000	-817,000	-6.74	-1.19
50 STATES, D.C. & P.R.	72,782,000	68,694,000	67,877,000	-4,905,000	-817,000	-6.74	-1.19

POPULATION COUNTS ARE JULY ESTIMATES FROM UNPUBLISHED DATA FROM THE CENSUS BUREAU. THE 1976-77 DATA FOR THE 3-5, 6-17, AND 18-21 YEAR OLD AGE GROUPS WERE ESTIMATED FROM THE 3-21 YEAR OLD AGE GROUP.

THE 1984-85, 3-5 AND 6-17 YEAR OLD AGE GROUP DATA WERE ESTIMATED FROM 3-4 AND 5-17 AGE GROUP DATA PROVIDED BY THE CENSUS.

THE 1985-86 YEAR AGE GROUP DATA WERE CALCULATED BY ADDING ESTIMATED INDIVIDUAL AGE YEAR DATA PROVIDED BY THE CENSUS.

THESE ESTIMATES INCLUDE BOTH HANDICAPPED AND NONHANDICAPPED INDIVIDUALS.

DATA AS OF OCTOBER 1, 1986.

Table EH2

ESTIMATED RESIDENT POPULATIONS BY STATE FOR 3-5 YEAR OLDS

STATE	NUMBER			CHANGE IN NUMBER		PERCENT CHANGE IN NUMBER	
	1976-77	1984-85	1985-86	1985-86 - 1976-77	1985-86 - 1984-85	1985-86 - 1976-77	1985-86 - 1984-85
ALABAMA	175,341	166,932	184,000	8,659	17,068	4.94	10.22
ALASKA	24,068	25,417	33,000	8,932	7,583	37.11	29.83
ARIZONA	120,127	129,900	157,000	36,873	27,100	30.70	20.86
ARKANSAS	101,569	100,795	108,000	6,431	7,205	6.33	7.15
CALIFORNIA	909,219	985,293	1,237,000	327,781	251,707	36.05	25.55
COLORADO	120,145	126,692	156,000	35,855	29,308	29.84	23.13
CONNECTICUT	113,358	97,341	118,000	4,642	20,659	4.09	21.22
DELAWARE	25,241	21,439	27,000	1,759	5,561	6.97	25.94
DISTRICT OF COLUMBIA	27,938	17,476	24,000	-3,938	6,524	-14.10	37.33
FLORIDA	344,352	344,580	427,000	82,648	82,420	24.00	23.92
GEORGIA	249,132	240,006	275,000	25,868	34,994	10.38	14.50
HAWAII	45,097	44,785	53,000	7,903	8,215	17.52	18.34
IDAHO	44,631	56,107	59,000	14,369	2,893	32.20	5.16
ILLINOIS	499,178	458,319	538,000	38,822	79,681	7.78	17.39
INDIANA	246,507	229,325	250,000	3,493	20,675	1.42	9.02
IOWA	118,766	119,605	135,000	16,234	15,395	13.67	12.87
KANSAS	96,784	101,792	122,000	25,216	20,208	26.05	19.85
KENTUCKY	162,249	157,824	170,000	7,751	12,176	4.78	7.71
LOUISIANA	198,917	206,421	243,000	44,083	36,579	22.16	17.72
MAINE	47,644	43,313	48,000	356	4,687	0.75	10.82
MARYLAND	164,831	142,193	181,000	16,169	38,807	9.81	27.29
MASSACHUSETTS	213,304	177,037	217,000	3,696	39,963	1.73	22.57
MICHIGAN	413,467	359,211	405,000	-8,467	45,789	-2.05	12.75
MINNESOTA	166,645	163,460	201,000	34,355	37,540	20.62	22.97
MISSISSIPPI	130,900	122,866	136,000	5,100	13,134	3.90	10.69
MISSOURI	205,393	194,177	229,000	23,607	34,823	11.49	17.93
MONTANA	35,214	36,881	42,000	6,786	5,119	19.27	13.88
NEBRASKA	69,511	69,382	80,000	10,489	10,618	15.09	15.30
NEVADA	27,838	33,244	39,000	11,162	5,756	40.10	17.31
NEW HAMPSHIRE	34,881	35,196	42,000	7,119	6,804	20.41	19.33
NEW JERSEY	290,746	252,107	293,000	2,254	40,893	0.78	16.22
NEW MEXICO	64,122	66,408	81,000	16,878	14,592	26.32	21.97
NEW YORK	702,865	613,067	712,000	9,135	98,933	1.30	16.14
NORTH CAROLINA	252,156	230,883	253,000	844	22,117	0.33	9.58
NORTH DAKOTA	30,231	31,210	36,000	5,769	4,790	19.08	15.35
OHIO	470,129	424,593	482,000	11,871	57,407	2.53	13.52
OKLAHOMA	126,173	142,198	164,000	37,827	21,802	29.98	15.33
OREGON	98,561	110,649	125,000	26,439	14,351	26.83	12.97
PENNSYLVANIA	460,377	402,752	468,000	7,623	65,248	1.66	16.20
PUERTO RICO	-	-	-	-	-	-	-
RHODE ISLAND	35,362	30,099	36,000	638	5,901	1.80	19.61
SOUTH CAROLINA	144,888	136,971	154,000	9,112	17,029	6.29	12.43
SOUTH DAKOTA	32,481	32,587	39,000	6,519	6,413	20.07	19.68
TENNESSEE	192,024	183,643	201,000	8,976	17,357	4.67	9.45
TEXAS	634,321	722,076	856,000	221,679	133,924	34.95	18.55
UTAH	81,356	121,556	121,000	39,644	-556	48.73	-0.46
VERMONT	20,524	19,782	24,000	3,476	4,218	16.94	21.32
VIRGINIA	216,877	200,498	237,000	20,123	36,502	9.28	18.21
WASHINGTON	147,905	173,820	208,000	60,095	34,180	40.63	19.66
WEST VIRGINIA	84,025	83,437	83,000	-1,025	-437	-1.22	-0.52
WISCONSIN	192,191	186,061	219,000	26,809	32,939	13.95	17.70
WYOMING	19,946	112,359	32,000	12,054	-80,359	60.43	-71.52
AMERICAN SAMOA	-	-	-	-	-	-	-
GUAM	-	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	-	-	-	-	-	-	-
U.S. & INSULAR AREAS	9,429,507	9,283,765	10,760,000	1,330,493	1,476,235	14.11	15.90
50 STATES, D.C. & P.R.	9,429,507	9,283,765	10,760,000	1,330,493	1,476,235	14.11	15.90

POPULATION COUNTS ARE JULY ESTIMATES FROM UNPUBLISHED DATA FROM THE CENSUS BUREAU. THE 1976-77 DATA FOR THE 3-5, 6-17, AND 18-21 YEAR OLD AGE GROUPS WERE ESTIMATED FROM THE 3-21 YEAR OLD AGE GROUP.

THE 1984-85, 3-5 AND 6-17 YEAR OLD AGE GROUP DATA WERE ESTIMATED FROM 3-4 AND 5-17 AGE GROUP DATA PROVIDED BY THE CENSUS.

THE 1985-86 YEAR AGE GROUP DATA WERE CALCULATED BY ADDING ESTIMATED INDIVIDUAL AGE YEAR DATA PROVIDED BY THE CENSUS.

THESE ESTIMATES INCLUDE BOTH HANDICAPPED AND NONHANDICAPPED INDIVIDUALS.

DATA AS OF OCTOBER 1, 1986.

Table EH3

ESTIMATED RESIDENT POPULATIONS BY STATE FOR 6-17 YEAR OLDS

STATE	NUMBER 1976-77	NUMBER 1984-85	NUMBER 1985-86	CHANGE IN NUMBER 1985-86 - 1976-77	CHANGE IN NUMBER 1985-86 - 1984-85	PERCENT CHANGE IN NUMBER 1985-86 - 1976-77	PERCENT CHANGE IN NUMBER 1985-86 - 1984-85
ALABAMA	812,953	769,068	755,000	-57,953	-14,068	-7.13	-1.83
ALASKA	102,411	100,583	100,000	-2,411	-583	-2.35	-0.58
ARIZONA	490,548	567,100	554,000	63,452	-13,100	12.93	-2.31
ARKANSAS	450,431	448,205	434,000	-16,431	-14,205	-3.65	-3.17
CALIFORNIA	4,446,498	4,404,707	4,304,000	-142,498	-100,707	-3.20	-2.29
COLORADO	551,093	566,308	547,000	-4,093	-19,308	-0.74	-3.41
CONNECTICUT	671,319	531,659	514,000	-157,319	-17,659	-23.43	-3.32
DELAWARE	128,764	107,561	104,000	-24,764	-3,561	-19.23	-3.31
DISTRICT OF COLUMBIA	136,585	90,524	79,000	-57,585	-11,524	-42.16	-12.73
FLORIDA	1,586,530	1,719,420	1,653,000	66,470	-66,420	4.19	-3.86
GEORGIA	1,120,109	1,128,994	1,112,000	-8,109	-16,994	-0.72	-1.51
HAWAII	191,110	187,215	181,000	-10,110	-6,215	-5.29	-3.32
IDAHO	186,590	209,893	211,000	24,410	1,107	13.08	0.53
ILLINOIS	2,429,966	2,106,681	2,031,000	-398,966	-75,681	-16.42	-3.59
INDIANA	1,182,681	1,043,675	1,016,000	-166,681	-27,675	-14.09	-2.65
IOWA	632,399	535,395	514,000	-118,399	-21,395	-18.72	-4.00
KANSAS	473,180	431,208	422,000	-51,180	-9,208	-10.82	-2.14
KENTUCKY	746,989	710,176	689,000	-57,989	-21,176	-7.76	-2.98
LOUISIANA	923,076	905,579	868,000	-55,076	-37,579	-5.97	-4.15
MAINE	237,130	214,687	205,000	-32,130	-9,687	-13.55	-4.51
MARYLAND	928,271	758,887	726,000	-202,271	-32,887	-21.79	-4.32
MASSACHUSETTS	1,242,391	966,962	918,000	-324,391	-48,962	-26.11	-5.06
MICHIGAN	2,095,777	1,737,789	1,687,000	-408,777	-50,789	-19.50	-2.92
MINNESOTA	898,231	762,540	740,000	-158,231	-22,540	-17.62	-2.96
MISSISSIPPI	562,604	544,134	525,000	-37,604	-19,134	-6.68	-3.52
MISSOURI	1,003,075	897,823	873,000	-130,075	-24,823	-12.97	-2.76
MONTANA	169,330	157,119	151,000	-18,330	-6,119	-10.83	-3.89
NEBRASKA	332,339	295,618	288,000	-44,339	-7,618	-13.34	-2.58
NEVADA	135,073	157,756	140,000	4,927	-17,756	3.65	-11.26
NEW HAMPSHIRE	183,785	175,804	169,000	-14,785	-6,804	-8.04	-3.87
NEW JERSEY	1,587,994	1,308,893	1,270,000	-317,994	-38,893	-20.02	-2.97
NEW MEXICO	280,878	288,592	283,000	2,122	-5,592	0.76	-1.94
NEW YORK	3,793,733	3,060,933	2,924,000	-869,733	-136,933	-22.93	-4.47
NORTH CAROLINA	1,181,836	1,121,117	1,087,000	-94,836	-34,117	-8.02	-3.04
NORTH DAKOTA	144,042	129,790	125,000	-19,042	-4,790	-13.22	-3.69
OHIO	2,355,041	1,989,407	1,927,000	-428,041	-62,407	-18.18	-3.14
OKLAHOMA	564,589	604,802	592,000	27,411	-12,802	4.86	-2.12
OREGON	478,903	478,351	468,000	-10,903	-10,351	-2.28	-2.16
PENNSYLVANIA	2,454,642	2,041,248	1,945,000	-509,642	-96,248	-20.76	-4.72
PUERTO RICO	-	-	-	-	-	-	-
RHODE ISLAND	199,207	159,901	152,000	-47,207	-7,901	-23.70	-4.94
SOUTH CAROLINA	645,989	640,029	618,000	-27,989	-22,029	-4.33	-3.44
SOUTH DAKOTA	151,333	136,413	130,000	-21,333	-6,413	-14.10	-4.70
TENNESSEE	899,154	867,357	841,000	-58,154	-26,357	-6.47	-3.04
TEXAS	2,779,661	3,106,924	3,062,000	282,339	-44,924	10.16	-1.45
UTAH	286,294	381,444	378,000	91,706	-3,444	32.03	-0.90
VERMONT	108,007	96,218	92,000	-16,007	-4,218	-14.82	-4.38
VIRGINIA	1,090,502	990,501	962,000	-128,502	-28,501	-11.78	-2.88
WASHINGTON	776,411	778,180	764,000	-12,411	-14,180	-1.60	-1.82
WEST VIRGINIA	380,112	369,563	359,000	-21,112	-10,563	-5.55	-2.86
WISCONSIN	1,043,493	878,939	850,000	-193,493	-28,939	-18.54	-3.29
WYOMING	84,744	419,641	99,000	14,256	-320,641	16.82	-76.41
AMERICAN SAMOA	-	-	-	-	-	-	-
GUAM	-	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	-	-	-	-	-	-	-
U.S. & INSULAR AREAS	46,337,803	43,081,233	41,438,000	-4,899,803	-1,643,233	-10.57	-3.81
50 STATES, D.C. & P.R.	46,337,803	43,081,233	41,438,000	-4,899,803	-1,643,233	-10.57	-3.81

POPULATION COUNTS ARE JULY ESTIMATES FROM UNPUBLISHED DATA FROM THE CENSUS BUREAU. THE 1976-77 DATA FOR THE 3-5, 6-17, AND 18-21 YEAR OLD AGE GROUPS WERE ESTIMATED FROM THE 3-21 YEAR OLD AGE GROUP.

THE 1984-85, 3-5 AND 6-17 YEAR OLD AGE GROUP DATA WERE ESTIMATED FROM 3-4 AND 5-17 AGE GROUP DATA PROVIDED BY THE CENSUS.

THE 1985-86 YEAR AGE GROUP DATA WERE CALCULATED BY ADDING ESTIMATED INDIVIDUAL AGE YEAR DATA PROVIDED BY THE CENSUS.

THESE ESTIMATES INCLUDE BOTH HANDICAPPED AND NONHANDICAPPED INDIVIDUALS.

DATA AS OF OCTOBER 1, 1986.

PRODUCED BY ED/SEP DATA ANALYSIS SYSTEM (DANS), NOVEMBER 19, 1986.
(T5A3C3)

Table EH4

ESTIMATED RESIDENT POPULATIONS BY STATE FOR 18-21 YEAR OLDS

STATE	NUMBER			CHANGE IN NUMBER		PERCENT CHANGE IN NUMBER	
	1976-77	1984-85	1985-86	1985-86 - 1976-77	1985-86 - 1984-85	1985-86 - 1976-77	1985-86 - 1984-85
ALABAMA	287,706	272,000	274,000	-13,706	2,000	-4.76	0.74
ALASKA	44,521	42,000	37,000	-7,521	-5,000	-16.89	-11.90
ARIZONA	177,325	196,000	206,000	28,675	10,000	16.17	5.10
ARKANSAS	152,000	150,000	156,000	4,000	6,000	2.63	4.00
CALIFORNIA	1,736,283	1,755,000	1,659,000	-77,283	-96,000	-4.45	-5.47
COLORADO	228,763	227,000	207,000	-21,763	-20,000	-9.51	-8.81
CONNECTICUT	236,324	221,000	212,000	-24,324	-9,000	-10.29	-4.07
DELAWARE	50,995	48,000	44,000	-6,995	-4,000	-13.72	-8.33
DISTRICT OF COLUMBIA	62,477	49,000	38,000	-24,477	-11,000	-39.18	-22.45
FLORIDA	594,118	662,000	677,000	82,882	15,000	13.95	2.27
GEORGIA	408,759	438,000	423,000	14,241	-15,000	3.48	-3.42
HAWAII	84,792	80,000	75,000	-9,792	-5,000	-11.55	-6.25
IDAHO	65,779	61,000	63,000	-2,779	2,000	-4.22	3.28
ILLINOIS	872,856	786,000	747,000	-125,856	-39,000	-14.42	-4.96
INDIANA	424,812	387,000	367,000	-57,812	-20,000	-13.61	-5.17
IOWA	218,835	186,000	184,000	-34,835	-2,000	-15.92	-1.08
KANSAS	193,036	167,000	152,000	-41,036	-15,000	-21.26	-8.98
KENTUCKY	271,761	260,000	256,000	-15,761	-4,000	-5.80	-1.54
LOUISIANA	322,007	322,000	316,000	-6,007	-6,000	-1.87	-1.86
MAINE	83,226	80,000	79,000	-4,226	-1,000	-5.08	-1.25
MARYLAND	343,897	327,000	309,000	-34,897	-18,000	-10.15	-5.50
MASSACHUSETTS	474,305	432,000	398,000	-76,305	-34,000	-16.09	-7.87
MICHIGAN	757,757	646,000	619,000	-138,757	-27,000	-18.31	-4.18
MINNESOTA	328,124	293,000	272,000	-56,124	-21,000	-17.10	-7.17
MISSISSIPPI	188,496	181,000	189,000	504	8,000	0.27	4.42
MISSOURI	378,532	344,000	320,000	-58,532	-24,000	-15.46	-6.98
MONTANA	60,456	50,000	52,000	-8,456	2,000	-13.99	4.00
NEBRASKA	126,150	109,000	101,000	-25,150	-8,000	-19.94	-7.34
NEVADA	48,088	60,000	58,000	9,912	-2,000	20.61	-3.33
NEW HAMPSHIRE	62,335	67,000	67,000	4,665	0	7.48	0.00
NEW JERSEY	519,260	489,000	500,000	-19,260	11,000	-3.71	2.25
NEW MEXICO	102,000	102,000	99,000	-3,000	-3,000	-2.94	-2.94
NEW YORK	1,317,403	1,220,000	1,179,000	-138,403	-41,000	-10.51	-3.36
NORTH CAROLINA	449,008	447,000	436,000	-13,008	-11,000	-2.90	-2.46
NORTH DAKOTA	55,727	45,000	45,000	-10,727	0	-19.25	0.00
OHIO	861,830	739,000	696,000	-165,830	-43,000	-19.24	-5.82
OKLAHOMA	215,238	221,000	211,000	-4,238	-10,000	-1.97	-4.52
OREGON	174,536	160,000	154,000	-20,536	-6,000	-11.77	-3.75
PENNSYLVANIA	877,981	773,000	764,000	-113,981	-9,000	-12.98	-1.16
PUERTO RICO	-	-	-	-	-	-	-
RHODE ISLAND	73,430	68,000	65,000	-8,430	-3,000	-11.48	-4.41
SOUTH CAROLINA	244,123	244,000	242,000	-2,123	-2,000	-0.87	-0.82
SOUTH DAKOTA	57,186	47,000	45,000	-12,186	-2,000	-21.31	-4.26
TENNESSEE	321,822	318,000	316,000	-5,822	-2,000	-1.81	-0.63
TEXAS	1,032,018	1,124,000	1,078,000	45,982	-46,000	4.46	-4.09
UTAH	113,350	119,000	106,000	-7,350	-13,000	-6.48	-10.92
VERMONT	39,470	40,000	37,000	-2,470	-3,000	-6.26	-7.50
VIRGINIA	446,620	429,000	402,000	-44,620	-27,000	-9.99	-6.29
WASHINGTON	292,683	284,000	269,000	-23,683	-15,000	-8.09	-5.28
WEST VIRGINIA	127,864	116,000	125,000	-2,864	9,000	-2.24	7.76
WISCONSIN	377,316	338,000	322,000	-55,316	-16,000	-14.66	-4.73
WYOMING	31,309	108,000	31,000	-309	-77,000	-0.99	-71.30
AMERICAN SAMOA	-	-	-	-	-	-	-
GUAM	-	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	-	-	-	-	-	-	
U.S. & INSULAR AREAS	17,014,689	16,329,000	15,679,000	-1,335,689	-650,000	-7.85	-3.98
50 STATES, D.C. & P.R.	17,014,689	16,329,000	15,679,000	-1,335,689	-650,000	-7.85	-3.98

POPULATION COUNTS ARE JULY ESTIMATES FROM UNPUBLISHED DATA FROM THE CENSUS BUREAU. THE 1976-77 DATA FOR THE 3-5, 6-17, AND 18-21 YEAR OLD AGE GROUPS WERE ESTIMATED FROM THE 3-21 YEAR OLD AGE GROUP.

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THESE ESTIMATES INCLUDE BOTH HANDICAPPED AND NONHANDICAPPED INDIVIDUALS.

DATA AS OF OCTOBER 1, 1986.

PRODUCED BY ED/SEP DATA ANALYSIS SYSTEM (DANS), NOVEMBER 19, 1986.
(T5A3C4)

Table EH5

ENROLLMENT
BY STATE FOR 5-17 YEAR OLDS

STATE	NUMBER			CHANGE IN NUMBER		PERCENT CHANGE IN NUMBER	
	1976-77	1984-85	1985-86	1985-86 - 1976-77	1985-86 - 1984-85	1985-86 - 1976-77	1985-86 - 1984-85
ALABAMA	752,507	711,000	716,000	-36,507	5,000	-4.85	0.70
ALASKA	91,190	94,000	106,000	14,810	12,000	16.24	12.77
ARIZONA	502,817	501,000	508,000	5,183	7,000	1.03	1.40
ARKANSAS	460,593	428,000	433,000	-27,593	5,000	-5.99	1.17
CALIFORNIA	4,380,300	4,105,000	4,144,000	-236,300	39,000	-5.39	0.95
COLORADO	570,000	542,000	549,000	-21,000	7,000	-3.68	1.29
CONNECTICUT	635,000	466,000	465,000	-170,000	-1,000	-26.77	-0.21
DELAWARE	122,273	90,000	95,000	-27,273	5,000	-22.31	5.56
DISTRICT OF COLUMBIA	125,848	86,000	87,000	-38,848	1,000	-30.87	1.16
FLORIDA	1,537,336	1,492,000	1,512,000	-25,336	20,000	-1.65	1.34
GEORGIA	1,095,142	1,044,000	1,048,000	-47,142	4,000	-4.30	0.38
HAWAII	174,943	163,000	164,000	-10,943	1,000	-6.26	0.61
IDAHO	200,005	207,000	210,000	9,995	3,000	5.00	1.45
ILLINOIS	2,238,129	1,812,000	1,926,000	-312,129	114,000	-13.95	6.29
INDIANA	1,163,179	973,000	975,000	-188,179	2,000	-16.18	0.21
IOWA	605,127	489,000	491,000	-114,127	2,000	-18.86	0.41
KANSAS	436,526	403,000	409,000	-27,526	6,000	-6.31	1.49
KENTUCKY	694,000	639,000	643,000	-51,000	4,000	-7.35	0.63
LOUISIANA	839,499	779,000	786,000	-53,499	7,000	-6.37	0.90
MAINE	248,822	207,000	207,000	-41,822	0	-16.81	0.00
MARYLAND	860,929	672,000	674,000	-186,929	2,000	-21.71	0.30
MASSACHUSETTS	1,172,000	852,000	844,000	-328,000	-8,000	-27.99	-0.94
MICHIGAN	2,035,703	1,702,000	1,695,000	-340,703	-7,000	-16.74	-0.41
MINNESOTA	862,591	689,000	699,000	-163,591	10,000	-18.97	1.45
MISSISSIPPI	510,209	461,000	465,000	-45,209	4,000	-8.86	0.87
MISSOURI	950,142	785,000	790,000	-160,142	5,000	-16.85	0.64
MONTANA	170,552	154,000	155,000	-15,552	1,000	-9.12	0.65
NEBRASKA	312,024	262,000	267,000	-45,024	5,000	-14.43	1.91
NEVADA	141,791	151,000	152,000	10,209	1,000	7.20	0.66
NEW HAMPSHIRE	175,496	157,000	157,000	-18,496	0	-10.54	0.00
NEW JERSEY	1,427,000	1,122,000	1,118,000	-309,000	-4,000	-21.65	-0.36
NEW MEXICO	284,719	268,000	272,000	-12,719	4,000	-4.47	1.49
NEW YORK	3,378,997	2,620,000	2,613,000	-765,997	-7,000	-22.67	-0.27
NORTH CAROLINA	1,191,316	1,079,000	1,084,000	-107,316	5,000	-9.01	0.46
NORTH DAKOTA	129,106	118,000	117,000	-12,106	-1,000	-9.38	-0.85
OHIO	2,249,440	1,786,000	1,846,000	-403,440	60,000	-17.94	3.36
OKLAHOMA	597,665	592,000	603,000	5,335	11,000	0.89	1.86
OREGON	474,707	443,000	445,000	-29,707	2,000	-6.26	0.45
PENNSYLVANIA	2,193,673	1,700,000	1,695,000	-498,673	-5,000	-22.73	-0.29
PUERTO RICO	688,592	-	-	-	-	-	-
RHODE ISLAND	172,373	133,000	132,000	-40,373	-1,000	-23.42	-0.75
SOUTH CAROLINA	620,711	599,000	607,000	-13,711	8,000	-2.21	1.34
SOUTH DAKOTA	148,000	122,000	123,000	-25,000	1,000	-16.94	0.82
TENNESSEE	841,974	814,000	819,000	-22,974	5,000	-2.73	0.61
TEXAS	2,822,754	3,022,000	3,080,000	257,246	58,000	9.11	1.92
UTAH	314,471	388,000	403,000	88,529	15,000	28.15	3.87
VERMONT	104,356	89,000	89,000	-15,356	0	-14.72	0.00
VIRGINIA	1,100,723	953,000	956,000	-144,723	3,000	-13.15	0.31
WASHINGTON	780,730	732,000	739,000	-41,730	7,000	-5.34	0.96
WEST VIRGINIA	404,771	367,000	371,000	-33,771	4,000	-8.34	1.09
WISCONSIN	945,337	760,000	761,000	-184,337	1,000	-19.50	0.13
WYOMING	90,587	102,000	104,000	13,413	2,000	14.81	1.96
AMERICAN SAMOA	9,950	-	-	-	-	-	-
GUAM	26,570	-	-	-	-	-	-
NORTHERN MARIANAS	-	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-	-
VIRGIN ISLANDS	25,026	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	-	-	-	-	-	-	-
U.S. & INSULAR AREAS	45,090,301	38,925,000	39,349,000	-5,741,301	424,000	-12.73	1.09
50 STATES, D.C. & P.R.	45,026,755	38,925,000	39,349,000	-5,677,755	424,000	-12.61	1.09

ENROLLMENT COUNTS ARE FALL MEMBERSHIP COUNTS COLLECTED BY CS.

1984-85 DATA ARE ESTIMATES FROM CS.

THESE ESTIMATES INCLUDE BOTH HANDICAPPED AND NONHANDICAPPED INDIVIDUALS.

DATA AS OF OCTOBER 1, 1986.

PRODUCED BY ED/SEP DATA ANALYSIS SYSTEM (DANS), NOVEMBER 19, 1986.
(T5A3E7)

Table EI1

STATE GRANT AWARDS UNDER EHA-B

FISCAL YEARS 1977 TO 1987

STATE	FY 1977	FY 1978	FY 1979	FY 1980	FY 1981
ALABAMA	3,365,542	3,776,498	9,199,597	14,638,340	16,142,271
ALASKA	490,567	490,576	1,141,091	1,496,568	1,815,450
ARIZONA	1,921,124	2,537,384	6,318,460	9,480,690	10,712,944
ARKANSAS	1,829,462	1,829,462	4,821,148	7,810,823	9,109,702
CALIFORNIA	18,609,066	23,333,515	49,893,306	70,607,419	79,687,992
COLORADO	2,335,174	2,845,535	6,464,413	9,210,259	9,903,380
CONNECTICUT	2,763,013	3,922,276	9,036,317	12,608,399	13,585,455
DELAWARE	622,204	778,246	1,899,113	2,388,519	2,703,088
DISTRICT OF COLUMBIA	668,848	668,848	668,848	889,169	668,848
FLORIDA	6,380,764	7,978,528	18,586,203	25,966,473	29,403,063
GEORGIA	4,618,356	5,926,761	13,159,542	20,397,400	22,520,969
HAWAII	836,262	836,262	1,588,630	2,152,962	2,383,302
IDAHO	781,714	895,985	2,630,753	3,636,051	3,969,749
ILLINOIS	10,221,515	14,912,002	33,570,710	46,144,147	49,727,517
INDIANA	5,010,905	5,839,638	12,344,388	19,349,909	20,896,619
IOWA	2,634,753	3,293,313	8,020,418	11,886,752	13,165,923
KANSAS	2,060,933	2,561,060	5,220,452	7,617,628	8,348,480
KENTUCKY	3,098,951	3,890,946	8,853,080	12,917,126	14,627,089
LOUISIANA	3,775,472	5,860,310	12,809,566	18,697,366	18,032,390
MAINE	960,286	1,430,099	3,093,590	4,862,830	5,178,763
MARYLAND	3,835,476	5,108,386	13,020,301	18,061,726	20,435,211
MASSACHUSETTS	5,212,919	8,442,257	19,103,830	27,132,919	29,052,864
MICHIGAN	6,817,578	10,074,857	22,185,712	30,918,947	32,662,429
MINNESOTA	3,758,157	4,935,284	11,381,563	16,675,984	18,484,039
MISSISSIPPI	2,317,010	2,317,010	4,836,602	8,103,290	9,331,896
MISSOURI	4,267,874	6,398,215	13,544,797	20,561,284	21,520,304
MONTANA	735,291	735,291	1,553,351	2,571,016	2,787,971
NEBRASKA	1,398,141	1,770,296	4,192,534	6,560,510	6,771,565
NEVADA	599,425	599,425	1,585,508	2,272,986	2,457,972
NEW HAMPSHIRE	760,460	760,460	1,410,832	2,013,039	2,032,877
NEW JERSEY	6,457,792	9,837,092	22,185,088	30,899,264	32,226,894
NEW MEXICO	1,128,789	1,128,789	2,515,083	3,999,549	4,533,290
NEW YORK	15,738,278	15,782,022	33,590,847	40,613,157	44,906,897
NORTH CAROLINA	4,992,790	6,519,459	14,280,965	21,911,084	24,886,341
NORTH DAKOTA	671,532	671,532	1,353,231	1,981,589	2,092,340
OHIO	10,057,668	11,052,816	25,431,188	38,035,508	42,757,590
OKLAHOMA	2,354,020	2,848,682	7,528,703	11,954,145	13,416,260
OREGON	1,975,798	2,343,180	5,070,752	7,919,081	8,956,731
PENNSYLVANIA	10,378,532	13,806,578	26,303,162	36,715,448	39,702,260
PUERTO RICO	2,899,064	2,899,064	2,899,064	3,947,773	4,461,798
RHODE ISLAND	843,286	1,046,913	2,044,598	2,878,460	3,477,474
SOUTH CAROLINA	2,710,586	4,967,615	10,768,402	14,655,884	15,832,244
SOUTH DAKOTA	698,770	698,770	1,314,050	1,907,349	2,104,369
TENNESSEE	3,707,002	5,812,671	14,768,309	22,953,867	20,742,741
TEXAS	11,265,148	15,522,153	41,631,558	55,107,937	57,396,480
UTAH	1,213,009	2,057,060	5,485,978	7,307,831	7,908,859
VERMONT	539,113	539,113	844,501	2,113,595	2,301,143
VIRGINIA	4,561,746	5,296,653	12,178,610	17,937,636	19,902,990
WASHINGTON	3,201,385	4,867,187	7,518,556	10,492,023	11,612,612
WEST VIRGINIA	1,567,670	2,078,304	4,509,105	6,481,990	7,459,706
WISCONSIN	4,348,328	4,348,328	8,772,508	12,368,991	14,370,398
WYOMING	470,988	470,988	1,162,321	1,866,912	2,008,365
AMERICAN SAMOA	180,508	228,445	456,910	498,032	541,859
GUAM	501,608	634,920	1,269,839	1,384,125	1,505,928
NORTHERN MARIANAS	-	-	167,523	182,600	198,669
TRUST TERRITORIES	578,813	732,554	1,297,586	1,414,369	1,538,833
VIRGIN ISLANDS	319,268	404,071	808,142	880,874	958,391
BUR. OF INDIAN AFFAIRS	1,951,207	2,493,437	5,582,918	7,916,796	8,658,416
U.S. & INSULAR AREAS	200,000,000	253,837,121	563,874,752	803,956,400	874,500,000
50 STATES, D.C. & P.R.	196,468,536	249,343,694	554,291,834	791,679,604	861,097,904

THE FIGURES REPRESENT THE AMOUNT OF FUNDS THAT NEW MEXICO WOULD HAVE RECEIVED IF IT CHOSE TO PARTICIPATE IN THE EHA-B PROGRAM FROM 1978-1983. SINCE NEW MEXICO CHOSE NOT TO PARTICIPATE, THE FUNDS IT WAS ELIGIBLE TO RECEIVE HAVE BEEN DISTRIBUTED ON A PRO RATA BASIS TO THE OTHER STATES. THESE ARE INITIAL AWARDS AVAILABLE TO THE STATES AS OF JULY 1 OF EACH YEAR, HOWEVER, THEY ARE SUBJECT TO REVISION SUBSEQUENTLY DUE TO CHANGES IN STATE CHILD COUNTS.

DATA AS OF OCTOBER 1, 1986.

Table E11

STATE GRANT AWARDS UNDER EHA-B

FISCAL YEARS 1977 TO 1987

STATE	FY 1982	FY 1983	FY 1984	FY 1985	FY 1986
ALABAMA	16,496,520	17,327,048	19,937,959	21,461,729	23,934,370
ALASKA	1,724,375	1,908,893	2,236,141	2,140,533	2,331,572
ARIZONA	10,967,770	11,717,476	12,552,869	13,004,666	13,738,979
ARKANSAS	9,870,620	10,616,820	11,254,792	11,667,090	12,147,342
CALIFORNIA	78,629,958	81,941,119	89,457,310	92,859,791	100,707,368
COLORADO	9,867,110	9,771,312	10,229,759	10,729,448	11,609,455
CONNECTICUT	13,989,814	14,533,536	15,591,792	16,046,273	16,932,313
DELAWARE	2,580,200	2,646,958	2,786,195	2,958,169	3,087,823
DISTRICT OF COLUMBIA	668,848	668,848	668,848	721,838	924,579
FLORIDA	29,958,710	32,555,626	36,562,960	38,548,912	42,377,283
GEORGIA	23,946,872	25,965,035	27,174,138	27,316,263	27,042,317
HAWAII	2,459,757	2,748,419	3,013,154	3,112,426	3,209,106
IDAHO	3,588,499	3,847,694	4,276,543	4,526,744	4,833,919
ILLINOIS	46,394,459	50,744,287	55,342,585	57,550,779	57,874,866
INDIANA	20,124,288	20,875,421	23,034,117	24,575,443	26,180,011
IOWA	13,183,570	12,908,320	13,708,973	14,383,703	15,475,012
KANSAS	8,546,625	9,346,142	10,462,665	10,571,072	10,759,929
KENTUCKY	14,837,741	15,876,225	17,349,486	18,375,056	19,522,495
LOUISIANA	16,717,880	17,480,965	19,953,569	20,751,738	20,827,240
MAINE	5,287,864	5,609,572	6,151,929	6,587,960	7,085,542
MARYLAND	20,798,023	20,656,394	21,822,760	22,704,279	24,028,460
MASSACHUSETTS	27,899,990	28,865,300	30,764,106	32,135,295	32,730,112
MICHIGAN	31,811,864	32,968,142	36,019,844	37,838,405	40,982,800
MINNESOTA	17,542,553	17,772,234	19,075,961	20,173,856	21,793,425
MISSISSIPPI	9,861,845	10,989,764	12,145,053	12,992,048	13,835,787
MISSOURI	21,203,010	22,333,146	24,031,895	24,787,127	26,052,201
MONTANA	2,843,025	3,179,570	3,662,565	3,878,043	4,161,151
NEBRASKA	6,635,772	7,216,152	7,438,856	7,723,895	8,146,905
NEVADA	2,487,839	2,748,189	3,148,438	3,330,291	3,662,694
NEW HAMPSHIRE	2,082,632	2,692,052	2,991,598	3,460,597	3,844,075
NEW JERSEY	33,193,777	36,569,891	38,904,157	41,292,822	43,989,042
NEW MEXICO	5,150,089	5,502,359	6,400,197	6,863,252	7,555,990
NEW YORK	45,334,825	51,393,775	58,056,431	63,084,181	68,286,446
NORTH CAROLINA	25,055,649	26,573,110	28,814,388	30,347,826	31,564,054
NORTH DAKOTA	1,982,812	2,265,271	2,555,520	2,845,374	3,088,367
OHIO	42,797,405	45,477,980	47,625,233	49,365,918	52,235,203
OKLAHOMA	13,487,420	14,598,185	15,856,164	16,414,274	17,277,942
OREGON	8,709,409	9,237,319	10,171,533	10,682,064	11,529,234
PENNSYLVANIA	40,047,180	40,120,105	44,079,864	45,921,287	48,708,205
PUERTO RICO	5,246,400	6,162,201	8,451,500	8,765,576	10,658,769
RHODE ISLAND	3,704,335	4,123,318	4,491,609	4,621,255	4,938,070
SOUTH CAROLINA	15,014,786	15,642,014	17,439,675	18,335,655	19,513,793
SOUTH DAKOTA	2,095,357	2,512,827	2,799,823	2,902,287	3,386,408
TENNESSEE	20,556,479	23,226,739	25,922,642	26,366,517	26,528,904
TEXAS	56,938,595	61,223,065	67,641,488	72,130,200	76,892,921
UTAH	7,592,734	8,315,888	9,262,706	10,184,529	10,908,678
VERMONT	2,139,234	2,117,566	1,747,535	1,928,334	2,169,770
VIRGINIA	20,741,641	21,995,403	24,171,638	25,651,633	27,358,034
WASHINGTON	13,254,651	13,926,380	15,073,701	16,280,877	17,433,489
WEST VIRGINIA	7,790,840	8,848,501	10,192,346	10,648,844	11,562,682
WISCONSIN	14,811,634	15,933,283	17,312,072	18,335,912	19,698,437
WYOMING	2,134,188	2,230,071	2,437,332	2,616,694	2,629,885
AMERICAN SAMOA	541,859	469,668	513,494	538,767	572,170
GUAM	1,505,928	1,348,248	1,474,0[illegible]2	1,546,632	1,642,523
NORTHERN MARIANAS	198,669	229,301	250,701	263,040	279,349
TRUST TERRITORIES	1,538,833	1,755,333	1,919,160	2,013,617	2,138,460
VIRGIN ISLANDS	958,391	1,247,663	1,364,109	1,431,247	1,519,984
BUR. OF INDIAN AFFAIRS	8,658,416	9,217,901	10,078,218	10,582,921	11,239,059
U.S. & INSULAR AREAS	874,189,569	930,774,016	1,017,854,178	1,068,875,004	1,135,144,999
50 STATES, D.C. & P.R.	860,787,473	916,505,910	1,002,254,414	1,052,498,780	1,117,753,454

THE FIGURES REPRESENT THE AMOUNT OF FUNDS THAT NEW MEXICO WOULD HAVE RECEIVED IF IT CHOSE TO PARTICIPATE IN THE EHA-B PROGRAM FROM 1978-1983. SINCE NEW MEXICO CHOSE NOT TO PARTICIPATE, THE FUNDS IT WAS ELIGIBLE TO RECEIVE HAVE BEEN DISTRIBUTED ON A PRO RATA BASIS TO THE OTHER STATES. THESE ARE INITIAL AWARDS AVAILABLE TO THE STATES AS OF JULY 1 OF EACH YEAR, HOWEVER, THEY ARE SUBJECT TO REVISION SUBSEQUENTLY DUE TO CHANGES IN STATE CHILD COUNTS.

DATA AS OF OCTOBER 1, 1986.

Table EI1

STATE GRANT AWARDS UNDER EHA-B

FISCAL YEARS 1977 TO 1987

STATE	FY 1987
ALABAMA	25,128,396
ALASKA	2,490,141
ARIZONA	14,102,816
ARKANSAS	12,221,215
CALIFORNIA	104,747,742
COLORADO	12,140,726
CONNECTICUT	17,283,657
DELAWARE	3,210,363
DISTRICT OF COLUMBIA	841,095
FLORIDA	45,502,658
GEORGIA	25,138,979
HAWAII	3,179,170
IDAHO	5,237,902
ILLINOIS	57,355,964
INDIANA	26,809,749
IOWA	15,578,352
KANSAS	10,944,534
KENTUCKY	19,602,795
LOUISIANA	19,991,313
MAINE	7,389,378
MARYLAND	24,270,869
MASSACHUSETTS	35,216,796
MICHIGAN	41,787,638
MINNESOTA	22,577,818
MISSISSIPPI	14,462,370
MISSOURI	27,004,705
MONTANA	4,117,743
NEBRASKA	8,405,932
NEVADA	3,778,520
NEW HAMPSHIRE	4,148,657
NEW JERSEY	46,019,848
NEW MEXICO	8,116,562
NEW YORK	69,398,655
NORTH CAROLINA	30,498,234
NORTH DAKOTA	3,133,495
OHIO	53,041,037
OKLAHOMA	17,722,865
OREGON	11,593,508
PENNSYLVANIA	50,777,323
PUERTO RICO	12,115,382
RHODE ISLAND	5,160,477
SOUTH CAROLINA	19,794,130
SOUTH DAKOTA	3,643,443
TENNESSEE	26,205,108
TEXAS	78,590,538
UTAH	11,136,147
VERMONT	2,279,868
VIRGINIA	28,092,001
WASHINGTON	18,019,197
WEST VIRGINIA	12,488,384
WISCONSIN	20,467,085
WYOMING	2,596,253
AMERICAN SAMOA	586,353
GUAM	1,683,236
NORTHERN MARIANAS	286,273
TRUST TERRITORIES	2,191,466
VIRGIN ISLANDS	1,557,659
BUR. OF INDIAN AFFAIRS	11,517,643
U.S. & INSULAR AREAS	1,163,281,995
50 STATES, D.C. & P.R.	1,145,459,365

THE FIGURES REPRESENT THE AMOUNT OF FUNDS THAT NEW MEXICO WOULD HAVE RECEIVED IF IT CHOSE TO PARTICIPATE IN THE EHA-B PROGRAM FROM 1978-1983. SINCE NEW MEXICO CHOSE NOT TO PARTICIPATE, THE FUNDS IT WAS ELIGIBLE TO RECEIVE HAVE BEEN DISTRIBUTED ON A PRO RATA BASIS TO THE OTHER STATES. THESE ARE INITIAL AWARDS AVAILABLE TO THE STATES AS OF JULY 1 OF EACH YEAR, HOWEVER, THEY ARE SUBJECT TO REVISION SUBSEQUENTLY DUE TO CHANGES IN STATE CHILD COUNTS.

DATA AS OF OCTOBER 1, 1986.

Table EJ1

FEDERAL, STATE AND LOCAL FUNDS EXPENDED FOR SPECIAL EDUCATION AND RELATED SERVICES FOR THE 1982-83 SCHOOL YEAR

	SPECIAL EDUCATION			RELATED SERVICES		
STATE	FEDERAL	STATE	LOCAL	FEDERAL	STATE	LOCAL
ALABAMA	10,540,114	52,173,647	3,940,854	4,607,815	2,757,461	895,068
ALASKA	2,553,757	28,283,578	1,823,707	4,416,174	4,766,979	446,779
ARIZONA	-	-	-	-	-	-
ARKANSAS	3,140,408	25,760,874	8,146,902	4,589,355	1,513,538	2,300,000
CALIFORNIA	57,000,000	754,100,000	300,000,000	13,500,000	176,900,000	72,300,000
COLORADO	7,221,171	38,243,296	51,912,922	4,124,253	19,310,116	26,137,708
CONNECTICUT	-	-	-	-	-	-
DELAWARE	4,493,561	26,441,167	9,076,286	363,817	1,312,811	486,684
DISTRICT OF COLUMBIA	1,909,190	12,976,312	0	1,825,909	1,271,803	0
FLORIDA	23,485,068	175,224,100	75,096,044	13,210,352	98,563,566	42,241,531
GEORGIA	17,984,013	115,206,294	38,910,219	3,986,599	8,650,614	5,087,546
HAWAII	3,185,194	23,821,454	0	116,032	6,642,142	0
IDAHO	3,000,000	35,000,000	1,600,000	608,637	1,782,289	239,114
ILLINOIS	-	-	-	-	-	-
INDIANA	10,557,230	57,011,903	41,360,351	4,961,528	13,227,676	9,783,576
IOWA	1,269,301	80,167,995	23,776,238	9,999,620	40,291,233	12,682,559
KANSAS	-	-	-	-	-	-
KENTUCKY	16,322,000	82,057,330	21,643,470	2,657,083	13,358,170	3,523,356
LOUISIANA	13,631,253	127,086,558	63,156,248	2,791,943	15,473,715	11,225,179
MAINE	6,182,231	12,155,476	15,239,361	1,114,422	1,742,095	2,479,431
MARYLAND	21,642,275	103,040,257	95,345,397	711,953	27,794,488	6,002,735
MASSACHUSETTS	16,818,526	92,631,268	149,296,764	7,613,262	41,931,503	67,582,337
MICHIGAN	32,027,954	138,891,719	215,195,565	9,756,722	43,860,543	67,958,495
MINNESOTA	15,000,000	86,000,000	57,000,000	2,500,000	14,000,000	9,000,000
MISSISSIPPI	-	52,873,360	-	-	11,011,607	-
MISSOURI	21,193,670	60,390,154	55,744,758	5,888,086	17,033,121	15,722,880
MONTANA	1,971,843	17,974,941	898,747	375,589	3,423,798	171,190
NEBRASKA	5,787,815	32,644,492	17,734,671	2,241,780	7,841,551	933,404
NEVADA	2,075,588	15,723,993	2,238,953	1,903,774	956,485	165,301
NEW HAMPSHIRE	-	-	-	-	-	-
NEW JERSEY	38,062,884	324,660,029	135,652,558	4,229,209	36,073,337	15,072,507
NEW MEXICO	0	60,482,487	-	0	10,315,495	-
NEW YORK	-	-	-	-	-	-
NORTH CAROLINA	24,748,868	117,555,384	8,817,178	4,636,064	15,489,877	3,458,292
NORTH DAKOTA	748,688	6,631,251	14,439,815	1,925,199	4,064,315	5,615,173
OHIO	22,330,000	194,810,000	265,650,000	6,670,000	58,190,000	79,350,000
OKLAHOMA	21,542,795	74,388,381	61,167,684	1,928,697	1,862,319	3,674,477
OREGON	12,000,000	25,000,000	70,000,000	1,800,000	3,100,000	6,900,000
PENNSYLVANIA	40,785,839	334,188,089	94,723,385	8,591,848	60,907,151	14,154,069
PUERTO RICO	4,728,496	13,889,707	0	2,103,277	2,552,531	0
RHODE ISLAND	-	-	-	-	-	-
SOUTH CAROLINA	12,480,731	48,522,851	16,174,843	4,593,999	7,183,551	2,382,848
SOUTH DAKOTA	1,644,340	5,565,329	11,569,912	242,817	821,822	1,708,508
TENNESSEE	11,948,154	59,191,317	25,951,848	6,500,000	3,000,000	377,000
TEXAS	51,555,498	320,270,925	123,213,400	13,810,195	59,262,270	16,872,980
UTAH	-	-	-	-	-	-
VERMONT	2,038,533	16,228,460	6,110,973	61,201	529,911	800,000
VIRGINIA	23,538,179	45,875,407	108,669,534	3,490,610	4,399,946	20,923,940
WASHINGTON	8,923,339	77,884,319	20,771,473	5,125,402	19,349,537	6,813,485
WEST VIRGINIA	9,247,542	55,060,477	8,895,722	1,027,504	6,117,830	988,413
WISCONSIN	13,687,080	100,249,976	51,195,340	5,680,751	29,700,926	25,958,164
WYOMING	1,418,922	8,989,543	12,401,898	1,135,089	9,833,450	5,395,245
AMERICAN SAMOA	-	-	-	-	-	-
GUAM	3,976,727	1,290,640	0	453,000	337,000	0
NORTHERN MARIANAS	-	-	-	-	-	-
TRUST TERRITORIES	-	-	-	-	-	-
VIRGIN ISLANDS	-	-	-	-	-	-
BUR. OF INDIAN AFFAIRS	6,471,265	0	0	9,706,897	0	0
U.S. & INSULAR AREAS	617,448,122	4,137,142,580	2,292,542,220	187,575,656	916,507,692	575,807,974
50 STATES, D.C. & P.R.	607,000,130	4,135,851,940	2,292,542,220	177,415,759	916,170,692	575,807,974

THE TOTAL MAY NOT SUM BECAUSE SOME STATES ONLY REPORTED TOTALS FOR SPECIAL EDUCATION AND RELATED SERVICES.

DATA AS OF OCTOBER 1, 1986.

Table EJ1

FEDERAL, STATE AND LOCAL FUNDS EXPENDED FOR SPECIAL EDUCATION AND RELATED SERVICES FOR THE 1982-83 SCHOOL YEAR

STATE	TOTAL FEDERAL	 STATE	 LOCAL
ALABAMA	15,147,129	54,931,108	4,835,922
ALASKA	6,969,931	33,050,557	2,270,486
ARIZONA	12,934,380	54,166,956	49,203,681
ARKANSAS	7,737,763	27,274,412	10,446,902
CALIFORNIA	71,100,000	931,000,000	380,300,000
COLORADO	11,345,424	57,553,412	78,050,630
CONNECTICUT	13,218,842	87,292,380	119,313,259
DELAWARE	4,857,378	27,753,978	9,562,970
DISTRICT OF COLUMBIA	3,735,099	14,247,315	0
FLORIDA	36,695,420	273,787,666	117,337,575
GEORGIA	21,970,613	123,856,908	43,997,765
HAWAII	3,301,226	30,463,596	0
IDAHO	3,608,637	30,782,289	1,839,114
ILLINOIS	78,059,606	441,131,848	526,584,337
INDIANA	21,518,758	70,239,579	51,143,927
IOWA	11,268,921	128,459,228	36,458,797
KANSAS	4,048,009	38,805,051	73,469,035
KENTUCKY	18,979,163	95,415,500	25,166,826
LOUISIANA	16,423,196	143,160,273	74,381,427
MAINE	7,266,653	13,897,571	17,718,792
MARYLAND	22,354,228	130,842,745	101,348,132
MASSACHUSETTS	24,431,788	134,562,771	216,879,101
MICHIGAN	41,784,676	182,752,262	283,152,060
MINNESOTA	17,500,000	100,000,000	66,000,000
MISSISSIPPI	14,079,470	63,884,967	10,019,350
MISSOURI	27,081,756	77,423,275	71,467,638
MONTANA	2,347,432	21,398,739	1,069,937
NEBRASKA	8,029,595	40,486,043	18,668,075
NEVADA	3,979,362	16,680,398	2,404,254
NEW HAMPSHIRE	3,432,618	9,365,312	28,413,274
NEW JERSEY	42,292,093	360,733,366	150,725,065
NEW MEXICO	0	70,797,982	–
NEW YORK	79,127,000	659,343,000	842,577,000
NORTH CAROLINA	29,384,932	133,045,181	12,275,470
NORTH DAKOTA	2,673,887	10,695,566	20,054,188
OHIO	29,000,000	253,000,000	345,000,000
OKLAHOMA	23,471,492	76,250,700	64,842,161
OREGON	13,800,000	28,100,000	76,900,000
PENNSYLVANIA	49,377,679	395,095,160	108,877,454
PUERTO RICO	6,831,773	16,362,238	0
RHODE ISLAND	3,944,573	57,042,007	–
SOUTH CAROLINA	17,074,730	55,706,402	18,557,691
SOUTH DAKOTA	1,887,157	6,387,151	13,278,420
TENNESSEE	18,448,154	62,191,317	26,328,848
TEXAS	65,365,693	379,533,195	140,086,380
UTAH	6,705,508	43,875,578	1,419,117
VERMONT	2,099,734	16,758,371	6,910,973
VIRGINIA	27,028,789	50,275,353	137,593,474
WASHINGTON	14,048,741	97,233,856	27,584,958
WEST VIRGINIA	10,275,046	61,178,307	9,884,135
WISCONSIN	19,367,831	129,950,902	77,153,504
WYOMING	2,554,012	18,822,993	17,797,143
AMERICAN SAMOA	–	–	–
GUAM	4,429,727	1,627,640	0
NORTHERN MARIANAS	–	–	–
TRUST TERRITORIES	–	–	–
VIRGIN ISLANDS	–	–	–
BUR. OF INDIAN AFFAIRS	16,178,162	0	0
U.S. & INSULAR AREAS	1,020,573,786	6,444,672,404	4,519,349,247
50 STATES, D.C. & P.R.	999,965,897	6,443,044,764	4,519,349,247

THE TOTAL MAY NOT SUM BECAUSE SOME STATES ONLY REPORTED TOTALS FOR SPECIAL EDUCATION AND RELATED SERVICES.

DATA AS OF OCTOBER 1, 1986.

Notes for Appendix E

Sources: December 1, 1985, State Child Count Reports and FY 1985 State-End-of-Year Reports. A dash in the tables indicates that the data were not available for the State.

Table EB1 - Related Services Table

1. Alaska--The State reported all estimated counts.
2. California--The State reported total counts of children receiving related services by handicapping condition; the data were reported in the other related services category. California was unable to provide counts for designated related services.
3. Colorado--The State reported all estimated counts.
4. Delaware--The State reported many estimated counts.
5. District of Columbia--The District reported all estimated counts.
6. Florida--The State reported all estimated counts. The State did not report counts of children receiving recreational services because these services are not provided through public education agencies in Florida.
7. Georgia--The State reported all estimated counts.
8. Hawaii--The State reported all estimated counts. The State reported counts of children receiving psychological and school social work services with counts of children receiving diagnostic services; the count was reported in the diagnostic services section. Counts of learning impaired children were included with counts of speech or language impaired children.
9. Indiana--The State reported all estimated counts.
10. Kansas--The State reported all estimated counts.
11. Massachusetts--The State estimated counts of children receiving school social work services, transportation, recreation, school health services, and counseling based upon the incidence rates of the handicapped condition.
12. Michigan--The State reported all estimated counts. Michigan combined counts of orthopedically impaired, other health impaired, and autistically impaired; the data were presented in the orthopedically impaired category.

13. Minnesota--The State reported all estimated counts.

14. Mississippi--The State combined counts of orthopedically impaired and other health impaired children; the data were reported in the orthopedically impaired category. Mississippi reported estimated counts of children receiving the following services: psychological, school social work, occupational therapy, audiological, recreational, diagnostic, transportation, school health, counseling, and other related services.

15. Missouri--The State reported all estimated counts.

16. Montana--The State reported all estimated counts.

17. Nebraska--The State reported estimated counts of children receiving psychological and diagnostic services. Nebraska reported actual total counts of children receiving occupational therapy, speech or language pathology and physical therapy by age groups only; counts by handicapping condition were not available. Also, for transportation, Nebraska reported a total count of 3-5 year old children and 6-21 year old children; the 6-21 year old count was reported in the 18-21 category. The State was unable to provide counts of children receiving school social work, audiological recreation, physical therapy, school health counseling, and other related services.

18. Nevada--The State reported all estimated counts.

19. New Hampshire--The State subsumed counts of children receiving psychological services within counts reported in the diagnostic and counseling services.

20. New Jersey--The State reported all estimated counts.

21. New Mexico--The State reported actual totals; the counts by age-range categories were estimated. New Mexico was unable to provide counts of children receiving school social work, transportation, school health, and counseling services.

22. New York--The State reported estimated total counts by handicapping conditions, counts by age-range categories were unavailable.

23. Ohio--The State reported all estimated counts. Ohio combined counts of orthopedically impaired and other health impaired; the data were presented in the orthopedically impaired category. Also, multihandicapped and deaf-blind counts were combined, the data were presented in the multihandicapped category.

24. Oklahoma--The State reported all estimated counts.

25. Oregon--The State reported all estimated counts.

26. Pennsylvania--The State reported all estimated counts. Pennsylvania included counts of brain damaged children with counts of specific learning disabled children. Pennsylvania combined counts of children receiving home/school visitors services with counts of children receiving school social work; the data were presented in the school social work section. Also, the State combined counts of children receiving adaptive physical education with counts of children receiving recreational services. The data were presented under recreational services.

27. South Carolina--The State reported all estimated counts.

28. South Dakota--The State reported estimated counts of children receiving transportation and school social work services.

29. Tennessee--The State reported estimated counts of children receiving occupational therapy, speech or language pathology, audiological, diagnostic, and physical therapy services. Tennessee was not able to provide counts of children receiving psychological, social work, recreational, school health, counseling, and other related services.

30. Wisconsin--The State reported estimated total counts for 3-21 year old children receiving psychological services (14,600), school social work (16,000), occupational therapy (2,567), speech or language pathology (11,208), and physical therapy (2,416). Wisconsin could not provide counts of children receiving audiological, recreational, diagnostic, transportation, school health services, counseling, and other related services.

31. Virginia--The State reported all estimated counts.

32. Washington--The State reported all estimated counts.

Table EC1 - LRE Tables

1. Alabama--The State combined counts of children in regular classes with counts of children in resource rooms; the data were presented under regular class categories. Correction facilities are an LEA under the Alabama system; therefore counts of children served in this environment are subsumed under other categories.

2. Alaska--The State reported all estimated counts.

3. California--The State did not report counts of children served under Chapter I of ECIA (SOP); therefore, counts of students receiving services in public separate facilities, public residential facilities, and private residential facilities were not reported. Also, California combined counts of children in homebound/hospital environments with counts of children in separate classes; the data were presented in the separate class section.

4. Connecticut--The State included counts of students served in noncategorical programs within its total counts of children served by educational environment. Also, Connecticut was unable to provide counts of students served in homebound/hospital environments.

5. Delaware--Most of the data reported by Delaware were estimated.

6. Florida--The State combined counts of hearing impaired children with counts of speech impaired children; the data were presented under the speech impaired category. Also, Florida did not report counts of multihandicapped children because the placement system in this State requires that children be placed according to their primary handicap. The State provided estimated data for private separate school facilities, public residential facilities, and private residential facilities.

7. Hawaii--Counts of learning impaired children were combined with counts of speech and language impaired children.

8. Idaho--The State included counts of children in Headstart Child Development Centers under the 3-5 year old speech or language impaired counts of children enrolled in separate classes. Youth counted under the public separate school facility category included youth in postsecondary vocational programs. Deaf-blind children served under Chapter 1 of ECIA(SOP) in public residential facilities were counted as multihandicapped.

9. Kansas--In this State, resource room placements are considered regular class placements; therefore, Kansas estimated the counts of children in regular and resource room environments. The State estimated counts of private separate school facilities, private residential facilities, and correctional facilities. The State also estimated counts of mentally retarded children 6-11, 12-17 and 18-21 in separate schools and mentally retarded children ages 6-11, 12-17, and 18-21 in public separate school facilities.

10. Louisiana--The State reported all children in homebound hospital environments in the other health impaired category. Louisiana did not report counts of children served in private residential facilities as in this State these children would be served in an LEA and included in other counts.

11. Michigan--The State reported all estimated counts. The State combined counts of orthopedically impaired, autistic, and other health impaired; the data were reported in the other health impaired category. The State also included counts of preprimary impaired children with the counts of specific learning disabled children.

12. Mississippi--The State reported estimated counts of 6-11 and 12-17 year old children in regular classes, resource rooms, separate classes, public separate school facilities, private residential facilities, and home/hospital

environments. Also, Mississippi combined counts of orthopedically impaired and other health impaired children; the data were presented under the orthopedically impaired category.

13. Montana--The State reported all estimated counts.

14. Nebraska--The State reported estimated counts of children attending regular classes, resource rooms, separate classes, and public separate school facilities.

15. Nevada--The State reported estimated total counts of children served in regular classes and resource rooms.

16. Oklahoma--The State reported estimated counts of children served by age and handicapping condition in the following environments:

    - regular classes;
    - resource rooms;
    - public separate school facilities;
    - private separate school facilities; and
    - private residential school facilities.

    Total counts represented actual data.

17. Oregon--The State reported all estimated counts.

18. Pennsylvania--The State reported all estimated counts. The counts for specific learning disabled students include counts of brain damaged students.

19. Virginia--The State reported estimated counts of children served by age and handicapping condition in private separate school facilities and private residential rooms in some elementary and secondary schools.

20. American Samoa--American Samoa has noncategorical resource rooms in some elementary and secondary schools.

21. Bureau of Indian Affairs--The Bureau reported estimated counts of children served in resource rooms.

22. Guam--Most of the data reported by Guam was estimated.

Tables ED1 and ED2 - Personnel Employed and Needed Tables

1. Alaska--The State reported all estimated counts.

2. California--The State reported estimated personnel needed counts.

3. Connecticut--The State reported total counts of teachers needed for the current school year which included counts of noncategorical teachers needed for separate classes (1.6), resource room teachers (6.4), and itinerant/consulting teachers (11.6).

4. Florida--The State combined counts of teachers of the hard of hearing with counts of teachers of the speech or language impaired; the data were presented under the speech or language impaired category. The State reported students in the area of their major handicap; therefore, no teachers of the multihandicapped were reported.

5. Georgia--The State included counts of teachers serving multihandicapped children with counts of teachers serving the orthopedically impaired and other health impaired.

6. Hawaii--The State included counts of 21 teachers of learning impaired children with the counts of total separate class teachers employed. This count was combined with teachers of the speech and language impaired. The State combined teachers of the orthopedically impaired with teachers of the other health impaired; the data were presented under the orthopedically impaired category.

7. Illinois--Illinois reported counts of teachers serving other health impaired children with counts reported in the orthopedically impaired category. The State reported counts of teachers serving deaf-blind children in the deaf, visually impaired, and multihandicapped categories. Also, Illinois included orientation instructors, prevocational coordinators, and daily living skills specialists (78.5) in the total count of personnel employed. Illinois included cross-categorical teachers, orientation and mobility instructors, prevocational coordinators, and daily living skills specialists (54) with its total counts of personnel needed.

8. Indiana--The State reported estimated personnel needed counts.

9. Kansas--The State combined counts of teachers of the deaf with counts of teachers of the hard of hearing; the data were presented under the hard of hearing category. The State included counts of teachers of the deaf-blind with counts of teachers of the multihandicapped; the data were presented under the multihandicapped category. Counts of work-study coordinators were included in various teacher categories. Counts of recreational therapists were included in the other non-instructional staff category. Also, Kansas subsumed counts of diagnostic staff in other undesignated categories.

10. Maine--The State reported estimated personnel needed counts.

11. Maryland--The State included counts of other instructional staff (7.6) in its reported total counts of personnel needed.

12. Michigan--All personnel employed counts were estimated. The State combined counts of teachers serving orthopedically impaired and autistic children with counts of teachers serving other health impaired children; the data were presented in the other health impaired category. The State used the counts of personnel needed for the current year as an estimate of the counts of personnel needed to improve services.

13. Minnesota--All vocational education teachers in Minnesota are licensed to provide instruction to handicapped children. No data were available of the number of vocational teacher actually serving the handicapped students.

14. Mississippi--The State reported all estimated counts. The State combined counts of teachers serving orthopedically impaired children with counts of teachers serving other health impaired children; the data were presented under the orthopedically impaired category.

15. Missouri--The State reported estimated counts of teachers needed by handicapping condition for the current school year.

16. Montana--The State reported only total counts because its service delivery model is noncategorical.

17. Nebraska--The State reported estimated counts of teachers serving mentally retarded and specific learning disabled children. Nebraska included counts of teachers serving orthopedically handicapped children with counts of teachers serving specific learning disabled children; the data were presented in the specific learning disabiled category. Nebraska does not certify or report teachers of the health impaired, deaf-blind, and multihandicapped.

18. New Mexico--The State reported estimated counts of teachers employed by handicapping condition served. New Mexico included counts of speech therapists (361.76) and orientation and mobility instructors (10.24) in its total personnel employed count. The State included counts of orientation and mobility teachers and speech therapists within total counts of personnel needed.

19 New York--Counts of teachers of the deaf-blind were included with other unspecified counts.

20. Ohio--The State reported all estimated counts.

21. Oklahoma--The State reported estimated counts of teachers.

22. Oregon--The State reported estimated counts of teachers. They also reported estimated counts of vocational education teachers, counselors, and other noninstructional staff. The State included counts of all vocational education teachers as data are not collected on the number of vocational teachers who teach only special education children.

23. Pennsylvania--The State reported all estimated counts. The counts of teachers of learning disabled children included teachers serving brain damaged children.

24. Rhode Island--The State reported all estimated counts.

25. South Dakota--The State did not report teacher counts by handicapping condition served because its service delivery pattern is noncategorical. The State reported estimated counts of teacher aides needed.

26. Tennessee--The State reported estimated counts of teachers.

27. Vermont--The State reported estimated counts of employed vocational education teachers, physical education teachers, psychologists, school social workers, occupational therapists, audiologists, and teacher aides.

28. Virginia--The State reported estimated counts of teachers. Counts of staff other than teachers were actual counts.

29. Washington--The State reported all estimated counts.

30. Wisconsin--The State reported estimated counts of teachers needed to improve services by handicapping condition served.

31. BIA--Placement in private schools through the BIA is by cost reimbursable contract. Personnel data for BIA on private schools are not included.

32. Guam--Guam reported estimated counts of employed teachers serving mentally retarded, multihandicapped and specific learning disabled children. Guam reported estimated counts of personnel needed for the current school year.

Table EE1 - Exiting Table

1. Alaska--The State reported all estimated data.

2. California--The State reported estimated counts.

3. Colorado--The State combined counts of orthopedically impaired and other health impaired; the data were presented in the orthopedically impaired category.

4. Delaware--The State reported some estimated counts of mentally retarded, emotionally disturbed, learning disabled, and hard of hearing children.

5. Florida--The State reported all estimated counts. Also, no data for multihandicapped children were provided because the State does not use this classification.

6. Georgia--The State reported all estimated counts.

7. Hawaii--The State reported estimated data by basis of exit for each age. Total counts were actual counts.

8. Illinois--The State reported estimated counts of children exiting the educational system.

9. Indiana--The State reported all estimated counts.

10. Kansas--The State reported all estimated counts.

11. Maine--The State reported total counts of anticipated services only; counts for individual ages were not available.

12. Maryland--The State assumed that all students 20-21 years of age who exited received a county certificate of completion of IEP; the State does not offer a certificate. In addition, a 4 percent drop-out rate, based on the average State drop-out percentage, was used.

13. Michigan--The State reported all estimate counts.

14. Minnesota--The State reported all estimated counts.

15. Mississippi--The State reported all estimated counts.

16. Missouri--The State reported all estimated counts.

17. Nebraska--The State reported all estimated counts.

18. Nevada--The State reported all estimated counts.

19. New Hampshire--The State included children whose parents refused special education services with counts of children dropping out.

20. New Jersey--The State reported all estimated counts.

21. New Mexico--The State reported all estimated counts.

22. New York--The State reported all estimated data. New York reported total counts by basis of exit and handicapping condition only; counts by age were not available.

23. Ohio--The State reported all estimated counts.

24. Oregon--The State reported all estimated counts.

25. Pennsylvania--The State reported all estimated counts.

26. Rhode Island--The State reported all estimated counts.

27. Tennessee--The State was unable to report counts of students exiting the system by basis of exit; counts by age and handicapping condition were reported.

28. Virginia--The State reported all estimated counts.

29. Washington--The State reported all estimated counts.

30. American Samoa--American Samoa reported all estimated data. No data were reported for exiting resource students.

31. BIA--The Bureau reported all estimated counts.

32. Guam--Guam reported all estimated counts.

Tables EF1 and EF2 - Anticipated Services Tables

1. Alaska--The State reported all estimated counts.

2. California--The State reported estimated counts.

3. Delaware--The State reported several estimated counts of mentally retarded, emotionally disturbed, and learning disabled children.

4. Florida--The State reported all estimated counts. Also, no data for multihandicapped children were provided because the State does not use this classification.

5. Georgia--The State reported all estimated counts.

6. Hawaii--The State reported all estimated counts.

7. Illinois--Illinois was unable to provide counts of anticipated services needed by exiting children by age or type of service; only total counts of children for whom services were anticipated were reported.

8. Indiana--The State reported all estimated counts.

9. Kansas--The State reported all estimated counts.

11. Kentucky--The State reported estimated counts of anticipated services needed by exiting children.

12. Maine--The State reported total counts of anticipated services only; counts for individual ages were not available.

13. Michigan--The State reported all estimate counts.

14. Minnesota--The State reported all estimated counts.

15. Mississippi--The State reported all estimated counts.

16. Missouri--The State reported all estimated counts.

17. Nebraska--The State reported all estimated counts.

18. Nevada--The State reported all estimated counts.

19. New Hampshire--The State was unable to report counts of anticipated services for students exiting the educational system.

20. New Jersey--The State reported all estimated counts.

21. New Mexico--The State reported all estimated counts.

22. New York--The State reported all estimated counts. New York reported total counts of anticipated services by handicapping condition only, counts by age were not available.

23. Ohio--The State reported all estimated counts.

24. Oregon--The State reported all estimated counts.

25. Pennsylvania--The State reported all estimated counts.

26. Rhode Island--The State reported all estimated counts.

27. Tennessee--The State was unable to report counts of children for whom services were anticipated.

28. Virginia--The State reported all estimated counts.

29. Washington--The State reported all estimated counts.

30. American Samoa--American Samoa reported all estimated counts.

31. BIA--The Bureau reported all estimated counts.

32. Guam--Guam reported all estimated counts.

Table EG1 - Improved Services Tables

1. Alaska--The State reported all estimated counts.

2. Arkansas--The State reported all estimated counts based on percentages of children served under Chapter 1 of ECIA (SOP) and EHA-B on December 1, 1984.

3. California--The State was unable to report counts.

4. Connecticut--The State was unable to report counts.

5. Colorado--The State reported all estimated counts.

6. Delaware--The State reported estimated counts for the following:

   - mentally retarded children (6-11, 12-17, and 18-21 years old);
   - hard of hearing children (6-11 and 12-17 years old);
   - speech or language impaired children (6-11 years old);
   - visually handicapped children (3-5 years old);
   - seriously emotionally disturbed children (3-5, 6-11; 12-17, and 18-21 years old);
   - orthopedically impaired children (6-11, 12-17, 18-21 years old);
   - other health impaired children (12-17 years old);
   - specific learning disabled children (6-11, 12-17, 18-21 years old); and
   - multihandicapped children (18-21 years old).

   Also, total counts were estimated.

7. District of Columbia--The District reported all estimated counts.

8. Florida--The State reported all estimated counts. Florida's reporting system counts children in the area of major handicap; therefore, no counts of multihandicapped children are reported. Also, Florida combined counts of hard of hearing children with counts of speech or language impaired children; the data were presented under the speech or language impaired category.

9. Georgia--The State reported all estimated counts based on averages of the first four months school attendance data for 1984-85 as reported by LEAs to the Georgia Department of Education.

10. Hawaii--The State reported all estimated counts. Counts of learning impaired children were included with counts of speech or language impaired children.

11. Illinois--The State was unable to report counts.

12. Indiana--The State reported all estimated counts.

13. Kansas--The State reported all estimated counts.

14. Kentucky--The State reported all estimated counts.

15. Louisiana--The State reported all estimated counts.

16. Maine--The State reported all estimated counts.

17. Michigan--The State reported all estimated counts.

18. Mississippi--The State reported all estimated counts.

19. Missouri--The State reported all estimated counts.

20. Montana--The State reported all estimated counts.

21. Nebraska--The State reported all estimated counts. Nebraska combined counts of multihandicapped children with counts of deaf-blind and other health impaired children; the data were presented under the multihandicapped category.

22. New Hampshire--The State was unable was unable to report counts of students in need of improved services.

23. New Jersey--The State reported all estimated counts.

24. New York--The State reported all estimated counts.

25. Pennsylvania--The State reported all estimated counts. Pennsylvania included counts of brain damaged children with counts of specific learning disabled children.

26. Rhode Island--The State reported all estimated counts.

27. South Carolina--The State reported all estimated counts.

28. American Samoa--American Samoa reported all estimated counts; American Samoa included 50 6-11 year old noncategorical children and 50 12-17 year old noncategorical children in its total counts of children in need of improved services.

29. BIA--The Bureau reported all estimated counts.

30. Guam--Guam reported all estimated counts.

Table EJ1 - Expenditure Table

1. Alabama--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

2. Alaska--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

3. Arizona--The State reported total expenditures only. Arizona was unable to separate expenditures for special education and related services.

4. Arkansas--The State reported estimated expenditures for special education and related services from Federal and local sources.

5. California--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

6. Colorado--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

7. Connecticut--The State reported total expenditures only. Connecticut was unable to separate expenditures for special education and related services.

8. Delaware--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

9. District of Columbia--The District reported all nonfederal expenditures as State expenditures.

10. Florida--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

12. Georgia--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

13. Hawaii--The State reported all nonfederal expenditures as State expenditures. Hawaii reported estimated expenditures for related services and total expenditures from State sources.

14. Idaho--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

15. Illinois--The State reported total expenditures only. Illinois was unable to separate expenditures for special education and related services. Total local expenditures were an estimated count.

16. Indiana--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

17. Kansas--The State reported estimated total expenditures only. Expenditures for special education and related services could not be separated.

18. Kentucky--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

19. Louisiana--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

20. Maryland--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

21. Massachusetts--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

22. Michigan--The State reported estimated expenditures for special education, related services and total services from Federal, State, and local sources.

23. Minnesota--The State reported estimated expenditures for special education, related services and total services from Federal, State and local sources.

24. Mississippi--The State reported estimated expenditures for special education and related services at the State level. Mississippi could not determine amounts expended from Federal and local sources for related services.

25. Missouri--The State combined State and local expenditures; the data were presented in the State category. Missouri reported estimated expenditures for related services from State and local funds.

26. Montana--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

27. Nevada--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

28. New Hampshire--The State reported total expenditures only; expenditures for special education and related services could not be separated.

29. New Jersey--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

30. New Mexico--The State combined State and local expenditures; the data were presented in the State category. New Mexico reported estimated expenditures for special education and related services from State and local sources.

31. New York--The State reported estimated total expenditures only; expenditures for special education and related services could not be separated. Also, New York did not include expenditures for 3,536 children in programs operated by State agencies other than the New York State Department of Education in its estimates.

32. North Dakota--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

33. Ohio--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

34. Oklahoma--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

35. Oregon--The State reported actual total expenditures in millions; expenditures for special education and related services could not be separated.

36. Pennsylvania--The State reported estimated expenditures for special education and related services from Federal, State and local sources based on actual expenditures.

37. Puerto Rico--Puerto Rico included all nonfederal expenditures in the State category.

38. Rhode Island--The State combined expenditures from State and local sources and reported an estimated total. Also, Rhode Island reported only total expenditures; expenditures for special education and related services could not be separated.

40. South Dakota--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

41. Tennessee--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

42. Texas--The State reported estimated expenditures for special education and related services from Federal, State, and local sources. Texas included all State administered Federal special education expenditures in the Federal category; this category did not include expenditures for State administration. The State included all State foundation funds (less local fund assignments) expended in local schools and State general revenue and available funds expended in special schools and community centers for handicapped students in the State category. The State category did not include funds expended for residential costs or State administration. Also, Texas included local fund assignments for State foundation funds, local salary enrichment for State funded personnel and local community resources in the Local category.

43. Utah--The State reported total expenditures only; expenditures for special education and related services could not be separated.

44. Vermont--The State reported estimated expenditures for special education and related services from local sources.

45. Virginia--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

46. Washington--The State reported estimated expenditures for special education and related services from Federal, State, and local sources. Also, Washington reported estimated total expenditures from State and Local sources.

47. West Virginia--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

48. Wisconsin--The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

49. Wyoming-The State reported estimated expenditures for special education and related services from Federal, State, and local sources.

50. Bureau of Indian Affairs--The Bureau reported estimated expenditures based on actual expenditures for special education and related services from Federal sources.

51. Guam--Guam reported all estimated expenditures for special education and related services. All nonfederal expenditures were reported as State expenditures.

APPENDIX F. SPECIAL STUDIES CONTRACTS

EVALUATION OF THE EDUCATION OF THE HANDICAPPED ACT

This appendix summarizes the specific evaluation activities supported by Special Studies monies from 1976 through 1983. The studies have been designed to provide information concerning the impact and effectiveness of the EHA as described in the fourth chapter of this report requested by Congress.

Special Studies Contracts

	Title	Contractor and Contract Number	Contract Period and Amount
1.	Assessment of State Information Capabilities under P.L. 94-142	Management Analysis Center (MAC), Inc. Cambridge, MA 300-76-0562	9/30/76 - 9/30/77 $298,840

Description: The purpose of this study was to determine the States' capacities to respond to the new reporting requirements inherent in P.L. 94-142. MAC analyzed the data requirements in the law and the reporting forms being developed by program staff. After visiting 27 States to test their capacity to respond, MAC reported on State capacity to provide information in four categories: children, personnel, facilities, and resources. They found capacity was relatively high in the first category and decreased across the remaining categories. They recommended deleting requirements for fiscal data, since States could not respond adequately to such requests.

2.	Development of a Sampling Procedure for Validating State Counts of Handicapped Children	SRI International Menlo Park, CA 300-76-0513	10/1/76 - 9/30/77 $267,790

Description: The purpose of this study was to develop a sampling plan and a method that could be used by program staff to validate the State counts. SRI International evaluated all previously available data on the incidence of handicapped children and concluded that the data reported by States were at least as accurate as other data sources, if not more so. SRI concluded that procedures for validating the information should be incorporated into the counting procedures themselves. SRI developed a handbook showing States how to do this.

Special Studies Contracts

	Title	Contractor and Contract Number	Contract Period and Amount
3.	An Analysis of Categorical Definitions, Diagnostic Methods, Diagnostic Criteria, and Personnel Utilization in the Classification of Handicapped Children	Council for Exceptional Children Reston, VA 300-76-0515	10/1/76 - 9/30/77 $110.904

Description: The purpose of this study was to determine the extent to which State policies (a) provided for services to children with disabilities other than those provided for under EHA-B, or (b) used varying definitions or eligibility criteria for the same categories of children. CEC found that neither of the types of children served nor the definitions varied widely. However, there were some instances in which eligibility criteria did vary.

4.	Implementation of the Individual Education Program	David Nero & Associates Portland, OR 300-74-7915	9/30/76 - 12/30/77 $433,000

Description: The purpose of this study was to estimate the difficulty of implementing the IEP provision of the Act. The work was performed by Nero and Associates and by internal staff. Four States were visited and a variety of individuals affected by the Act were interviewed. The study revealed that (a) similar concerns were identified both in States that already had provisions and in those that did not, and (b) similar concerns were raised by both special education and regular teachers. The findings were used to design technical assistance and inservice training programs.

5.	Analysis of State Data	Team Associates Washington, D.C. 300-76-0540	9/29/76 - 9/11/77 $192,698 9/12/77 - 6/30/78 $175,396

Description: The purpose of this study was to analyze data already available from the States. The work was performed by TEAM Associates and by internal staff. The State data contained all numerical information required in the Act as well as extensive information on policies and procedures. Analysis of the information contained in these State documents and information obtained from Special Studies form the backbone of the Annual Report to Congress.

Special Studies Contracts

	Title	Contractor and Contract Number	Contract Period and Amount
6.	Longitudinal Study of the Impact of P.L. 94-142 on a Select Number of Local Educational Agencies	SRI International Menlo Park, CA 300-78-0030	1/16/77 - 9/16/78 $197,707 9/16/78 - 9/15/79 $566,838 9/15/79 - 2/28/81 $498,112 2/28/81 - 10/31/81 $249,993 11/1/81 - 12/15/82 $250,006

Description: The purpose of this study was to follow a small sample of school systems over a 5 year period to observe their progress in implementing the Act. Because Congress asked that the annual report describe progress in implementation, this in-depth study of processes was designed to complement the National trends reported by States. In this study, SRI International described the implementation process for the school districts and identified problem areas.

7.	Criteria for Quality	Thomas Buffington Associates Washington, D.C. 300-77-0237	5/19/77 - 2/28/79 $395,162

Description: This study was designed to lay the groundwork for future studies of the quality and effectiveness of P.L. 94-142's implementation. It was conducted by internal staff with the assistance of Thomas Buffington Associates. The study focused on four principal requirements of the law: provision of due process, least restrictive placements, individualized education programs, and prevention of erroneous classification. The study solicited 15 position papers on evaluation approaches for each requirement for LEA self-study guides. Four monographs addressing the evaluation of these four provisions of the law were produced. Each monograph includes the relevant papers and a review by a panel of education practitioners.

Special Studies Contracts

	Title	Contractor and Contract Number	Contract Period and Amount
8.	National Survey of Individualized Education Programs	Research Triangle Institute (RTI) Research Triangle Park, NC 300-77-0529	1/16/77 - 9/16/78 $197,707 10/1/78 - 9/30/79 $661,979 10/1/79 - 10/30/80 $125,181

Description: The purpose of this study was to determine the nature and quality of the individualized education programs being designed for handicapped children. These programs are at the heart of the service delivery system, and the Congress asked for a survey of them. RTI spent the 1977-78 school year designing a sampling plan and information gathering techniques. Data collected in school year 1978-79 provided descriptive information about IEP documents. The study found that 95 percent of handicapped children have IEPs. Most IEPs meet minimal requirements of the Act, except for the evaluation component.

	Title	Contractor and Contract Number	Contract Period and Amount
9.	A Descriptive Study of Teacher Concerns Said to Be Related to P.L. 94-142	Roy Littlejohn & Associates Washington, D.C.	7/9/76 - 10/30/78 $328,758

Description: The purpose of this study was to assess the array of concerns raised by teachers regarding the effects of the Act on their professional responsibilities. Several concerns were raised by teachers during the course of the FY 76 study on the implementation of the individualized education program, and several have been raised by National teachers' organization. Roy Littlejohn & Associates organized the concerns into general types and analyzed the relationships between these categories of concerns and the requirements of the Act. They visited six school districts to analyze in detail a small number of examples. Recommendations were made for school districts to provide teachers with more information about P.L 94-142.

Special Studies Contracts

	Title	Contractor and Contract Number	Contract Period and Amount
10.	Case Study of the Implementation of P.L. 94-142	Education Turnkey Systems Washington, D.C. 300-77-0528	9/30/77 - 5/31/79 $484,452

Description: The purpose of this study was to assess the first year of implementation of the Act. Education Turnkey Systems observed nine local school systems during the 1977-78 school year and the first half of the 1978-79 school year to determine how priorities were established and how implementation decisions were made at each level of the administrative hierarchy. P.L. 94-142's implementation was observed to be well under way at each LEA despite varying levels of resources and organizational differences among sites. Problem areas were identified.

11.	Clarification of P.L. 94-142 for the Classroom Teacher	Research for Better Schools Philadelphia, PA 300-77-0525	10/1/77 - 1/31/78 $24,767

Description: The purpose of this project was to provide regular teachers with accurate information about P.L. 94-142 and its probable effects on their classrooms. A field-tested guide entitled Clarification of P.L. 94-142 for the Classroom Teacher was produced by Research for Better Schools for this purpose. The guide contains (1) a self-evaluation pretest; (2) an explanation of the law, its background, purpose, and major provisions; (3) questions most frequently asked by teachers about P.L. 94-142 and their answers; (4) activities to help classroom teachers prepare themselves and their students for implementation of the law; and (5) two appendices, one containing the P.L. 94-142 regulations, and the other an annotated bibliography.

12.	Study for Determining the Least Restrictive Environment Placement of Handicapped Children	Applied Management Sciences (AMS) Silver Spring, MD 300-78-0427	9/12/78 - 1/10/80 $369,770

Description: The purpose of this study was to investigate the rules or criteria used by the courts and States' hearing officers to determine the placements of handicapped children, the guidance given by States to school districts in making placement decisions, and the actual placement procedures used by school districts. Placement decision rules and interpretations of the Act's least restrictive environment requirement were compared across arenas. Exemplary practices at the State and local educational agency levels were described.

Special Studies Contracts

	Title	Contractor and Contract Number	Contract Period and Amount
13.	Special Teens and Parents: Study of P.L. 94-142's Impact	ABT Associates, Inc. Washington, D.C. 300-78-0462	10/1/78 - 9/30/79 $47,220 10/1/79 - 9/30/80 $53,687

Description: This case study was originally intended to continue for 5 years but was terminated at the end of the second year because of a cutback in Special Studies money. The study examined the impact of P.L. 94-142 on learning disabled secondary students and their families. For four requirements of the law--protection in evaluation, individualized education programs, least restrictive environment, and procedural safeguards--the study investigated how the requirements were implemented by the secondary school special education program, the impact of the school program and practices on the students, and the implications of the experiences of the students for those concerned with the education of learning disabled adolescents.

14.	Activist Parents and Their Disabled Children: Study of P.L. 94-142's Impact	American Institutes for Research (AIR) Cambridge, MA 300-78-0463	10/1/78 - 9/30/79 $55,641 10/1/79 - 9/30/80 $63,374

Description: This case study was originally intended to continue for 5 years but was terminated at the end of the second year because of a cutback in Special Studies money. The study focused on parents who responded energetically to the invitation to activism offered by P.L. 94-142, and examined the benefits of parent activism for the child. Effective strategies were identified and the history of their development described. The cost of parental involvement was described in emotional and economic terms, and program benefits to children were shown.

Special Studies Contracts

<table>
<tr><th></th><th>Title</th><th>Contractor and Contract Number</th><th>Contract Period and Amount</th></tr>
<tr><td>15.</td><td>The Quality of Educational Services: Study of P.L. 94-142's Impact</td><td>Huron Institute
Cambridge, MA
300-78-0465</td><td>10/1/78 - 9/31/79
$51,239
10/1/79 - 8/31/80
$60,000</td></tr>
<tr><td></td><td colspan="3">Description: This case study was originally intended to continue for 5 years but was terminated at the end of the second year because of a cutback in Special Studies money. The study examined the extent to which school district implementation of P.L. 94-142 results in quality educational services to the handicapped child and the consequences to the child and family. The first year focused on entry into special education during the preschool years, the emotional consequences of the diagnostic process, parental education about P.L. 94-142, and early programming for preschoolers. The second year focused on factors that influence mutual adaptation between families and school staff.</td></tr>
<tr><td>16.</td><td>Children with Different Handicapping Conditions: Study of P.L. 94-142's Impact</td><td>Illinois State University
Normal, IL
300-78-0461</td><td>9/1/78 - 8/31/79
$46,060
9/1/79 - 8/31/80
$55,295</td></tr>
<tr><td></td><td colspan="3">Description: This case study was originally intended to continue for 5 years but was terminated at the end of the second year because of a cutback in Special Studies money. It focused on differences in the impact of P.L. 94-142 implementation on children with various handicapping conditions and their families. The study looked at the consequences to families from five theoretical perspectives and related these to the provisions and implementation of the Act.</td></tr>
<tr><td>17.</td><td>Institutional Responses and Consequences: Study of P.L. 94-142's Impact</td><td>High/Scope Educational Research Foundation
Ypsilanti, MI
300-78-0464</td><td>10/1/78 - 9/30/79
$48,387
10/1/79 - 9/30/80
$56,228</td></tr>
<tr><td></td><td colspan="3">Description: Description: This case study was originally intended to continue for 5 years but was terminated at the end of the second year because of a cutback in Special Studies money. The study investigated the relationship of school district responses to P.L. 94-142 to handicapped child and family outcomes, such as self-concept, social skills and competencies, academic achievement, and economic activity.</td></tr>
</table>

Special Studies Contracts

	Title	Contractor and Contract Number	Contract Period and Amount
18.	Project to Provide Technical Assistance in Data Analysis	Decision Resources Corporation Washington, D.C. 300-78-0467	10/1/78 - 9/30/79 $142,614 10/1/79 - 9/30/80 $199,714 10/1/80 - 5/31/81 $ 89,919
		300-82-0001	10/1/82 - 9/30/83 $125,071 10/1/83 - 10/31/84 $144,171
		300-84-0246	10/1/84 - 9/30/85 $196,632 10/1/85 - 9/30/86 $348,564 10/1/86 - 10/31/87 $215,797

Description: The purpose of this project is to analyze data already available from States. The work is being performed by Decision Resources and by internal staff. State data available to OSEP annually contain all numerical information required in the Act as well as extensive information on policies and procedures. Analysis of the State data is conducted throughout the year for dissemination to the field and for inclusion in the Annual Report to Congress.

	Title	Contractor and Contract Number	Contract Period and Amount
19.	Identification of Future Trends in the Provision of Services to Handicapped Students	Newtek Corporation Reston, VA 300-78-0302	6/1/78 - 9/30/78 $10,000

Description: This project was designed to provide information on potential future changes in values, economics, social institutions, technology, and medicine that may affect the provision of services to handicapped children. In 1978, Newtek Corporation held a conference with experts in the five areas who discussed the trends in their areas and the implications of those trends for the handicapped with panel members representing various aspects of services to the handicapped. Although in many cases the projected trends were too speculative to guide policy-making, the conference highlighted some potentially important trends about which policy-makers should be aware. A summary of the conference was published in Focus on Exceptional Children.

Special Studies Contracts

	Title	Contractor and Contract Number	Contract Period and Amount
20.	A Project to Develop BEH Waiver Requirements, Procedures, and Criteria	Planning and Human Systems, Inc. Washington, D.C. 300-78-0128	5/1/78 - 12/15/78 $64,500

Description: States that provide clear and convincing evidence that all handicapped children have a free appropriate public education available to them may receive a partial waiver of the law's fiscal nonsupplant requirement. A 6 month study was undertaken by Planning and Human Systems in 1978 to develop guidelines to be used in reviewing a State's request for a waiver. The guidelines were developed based on (1) an evaluation of experiences in conducting a review of a request by Massachusetts for a waiver in 1978; (2) information provided by Federal, State, and local agencies and by State consumer, advocacy, and professional associations; and (3) a review of monitoring procedures used by other Federal agencies.

21.	A Study to Evaluate Procedures Undertaken to Prevent Erroneous Classification of Handicapped Children	Applied Management Sciences (AMS) Silver Spring, MD 300-79-0669	10/1/79 - 9/30/80 $200,403 10/1/80 - 9/30/81 $480,092 10/1/81 - 9/30/82 $179,906 10/1/82 - 3/31/83 $ 37,310

Description: This study focused on describing LEA procedures for identifying, assessing, and placing students to determine whether procedures were in place to prevent the erroneous classification of children, particularly misclassification on the basis of race or culture. AMS collected data from 500 schools in 100 school districts and reviewed selected documents for 10,000 individual students. Five topics were addressed: (a) the extent to which LEAs use evaluative data such as adaptive behavior and classroom observations in their assessments; (b) a comparison of evaluation procedures for minority and nonminority students; (c) assessment training needs as identified by the respondents; (d) the extent to which school staff members document evaluation decisions; and (e) the extent to which school systems have students waiting to be evaluated.

Special Studies Contracts

	Title	Contractor and Contract Number	Contract Period and Amount
22.	Survey of Special Education Services	Rand Corporation Santa Monica, CA 300-79-0733	10/1/80 - 9/30/81 $225,402

Description: The purpose of this study was to survey and describe the services provided by school districts and the number and nature of services actually received by handicapped children. As a result of cutbacks in Special Studies money, this contract was terminated at the end of the first year.

23.	Study of Student Turnover Between Special and Regular Education	SRI International Menlo Park, CA 300-79-0660	10/1/79 - 3/31/81 $220,299

Description: The purpose of this study was to provide information about student flow between special and regular education. SRI International (1) described the characteristics of children leaving special education and the reasons for their departure, ()2) identified the extent to which handicapped children transfer successfully into regular education programs, and (3) identified children who may receive treatment of short duration and therefore may not be receiving services when Federal counts are taken.

24.	Legal Conference on the Surrogate Parent Requirement	Federation for Children with Special Needs Boston, MA 310-1-76-BH-02	5/1/79 - 8/31/79 $35,358

Description: This project investigated the legal issues surrounding P.L. 94-142's surrogate parent requirement and explored as many approaches as possible for responding to these issues. The Federation for Children with Special Needs held a conference in July 1979 that included four State representatives who are involved in the legal aspects of implementing the parent surrogate requirements, two persons from National organizations, and representatives from the General Counsel's Office of HEW, the Justice Department, and program staff. Information provided at this conference, information reported by several States on their experience in implementing the parent surrogate requirement, and independent legal research were used as a basis for analyzing the issues involved. The analysis was used to review the need for policy clarification.

Special Studies Contracts

	Title	Contractor and Contract Number	Contract Period and Amount
25.	Analysis of State and Local Implementation Efforts	Newtek Corporation Reston, VA 300-79-0722	10/1/79 - 5/15/80 $31,854

Description: This study was designed to provide information on the budgetary factors at State and local levels that affect the implementation of P.L. 94-142. The study, conducted by Newtek Corporation, investigated the special education budgetary process at the State level and examined in detail budgetary processes in four LEAs selected on the basis of demography. A guidebook was produced describing the Federal funding process for P.L. 94-142 as well as State and local special education funding processes.

	Title	Contractor and Contract Number	Contract Period and Amount
26.	State/Local Communication Network for Exploring Critical Issues Related to P.L. 94-142	National Association of State Directors of Special Education (NASDSE) Washington, D.C. 300-79-0721	10/1/79 - 9/30/80 $159,175 10/1/80 - 9/30/81 $195,759 10/1/81 - 9/30/82 $151,320 10/1/82 - 9/30/83 $192,249 10/1/83 - 9/30/84 $183,505 10/1/84 - 9/30/85 $186,129 10/1/85 - 9/30/86 $195,051 10/1/86 - 9/30/87 $203,800

Description: The Forum project, conducted by NASDSE, provides a communication network for local, State, and Federal levels. All 50 SEAs and more than 100 LEAs are Forum participants. The project conducts analyses of important issues and practices in SEAs and LEAs to assist OSEP in providing technical assistance to the field as specified under Section 617 of EHA. The communication network provides OSEP a mechanism for obtaining timely feedback on current and emerging trends related to issues and practices in providing a free appropriate public education to all handicapped children. Technical assistance is also given by the project to participating SEAs and LEAs through the communication network.

	Title	Contractor and Contract Number	Contract Period and Amount
27.	SEA/LEA Technical Assistance Training	TRISTAR University of North Carolina Chapel Hill, NC 300-79-0661	10/1/79 - 9/30/80 $87,000 10/1/80 - 9/30/81 $73,937

Description: In response to needs identified by SEAs and LEAs for information in specific areas of implementation of P.L. 94-142, OSEP funded TRISTAR (a cooperative organization of the North Carolina Department of Public Instruction, the University of North Carolina, and the Wake County Public Schools) in FY 80 and FY 81. During its first year, TRISTAR conducted two conferences for SEAs, LEAs, and the Regional Resource Centers on problems and successful practices in the following areas: child count, child find, individualized education programs, and interagency cooperation. The contractor then provided follow-up technical assistance to participants who requested it. In its second year, TRISTAR focused on providing information to educational agencies on how to reduce adversarial relationships between parents and schools. Technical assistance materials were developed by the project, other resources were identified, and a National topical conference was conducted in June 1980.

	Title	Contractor and Contract Number	Contract Period and Amount
28.	Verification of Procedures to Serve Handicapped Children	Applied Management Sciences (AMS) Silver Spring, MD 300-79-0702	10/1/79 - 8/31/80 $97.939 9/1/80 - 8/31/81 $70,000

Description: This study had two components--an assessment component and a secondary component. The assessment component investigated three processes that influence the timeliness with which a school system conducts evaluations for students who have been identified as potentially handicapped--referral/screening, case coordination, and quality control. This component of the study was conducted in the school districts of three cities of moderate size. A total of 94 personnel involved with the evaluation process participated in the study. The secondary component was conducted in two phases. The first phase examined the class schedules of 458 handicapped students in 11 public high schools in two States for information concerning the number and type of handicapped students who received services, they type of coursework the students took, the extent to which they received services in integrated settings, and the extent to which they received services comparable to those of nonhandicapped students. The second phase of the study involved the identification and documentation of promising strategies for serving secondary handicapped students. Strategies were grouped into the following topics: personnel utilization, special education curriculum development, internal special education strategies, regular education teacher preparation/support, special education student preparation/support, and vocational options.

29.	Special Study on Terminology	SRA Technologies Mountain View, CA 300-84-0144	5/21/84 - 2/21/85 $209,670

Description: This 9 month study was undertaken to respond to the data requirements of Section 17 of P.L. 98-199 for a "Special Study on Terminology." The purpose of the procurement was to conduct a review and assessment of the impact of the terms "seriously emotionally disturbed" (SED) and "behaviorally disordered" (BD), and their definitions on (a) the number and type of children and youth currently being and anticipated to be served in special and regular education programs, (b) identification, assessment, special education and related services provided and the availability of such services, (c) setting in which special education and related services are provided, (d) attitudes of and relationships among parents, professionals, and children and youth, and (e) training of professional personnel providing special education services. Examples of SED children who are currently effectively and ineffectively served were also provided. The Study will culminate in a report which addresses all of the above data elements.

Special Studies Contracts

	Title	Contractor and Contract Number	Contract Period and Amount
30.	Feasibility Study: Longitudinal Study on a Sample of Handicapped Students	SRI International Menlo Park, CA 300-84-0258	9/27/84 - 9/27/85 $285,409 4/10/85 - 4/30/86 $212,103 6/3/85 - 4/30/86 $48,051 5/1/86 - 7/28/86 $100,000 7/29/86 - 10/15/86 $71,526

Description: This contract was developed in response to Section 8, P.L. 98-199 which stipulates that a longitudinal study of a sample of handicapped students be conducted as part of the mandated evaluation effort to assess the impact of P.L. 94-142. Due to the magnitude and importance of the proposed 5 year longitudinal study, this 1 year feasibility study was awarded to develop a conceptual framework, alternative study design plan, site selection plan, student sampling plan, data collection instrumentation, data analysis and reporting plan, and field test design and methodology.

	Title	Contractor and Contract Number	Contract Period and Amount
31.	Survey of Expenditures for Special Education and Related Services at State and Local Levels	Decision Resources Corporation Washington, D.C. 300-84-0257	9/30/84 - 9/29/85 $505,309 9/30/85 - 9/29/86 $506,465 9/30/86 - 9/29/87 $585,495

Total: $1,597,269

Description: This Congressionally mandated project will provide SEP with detailed expenditure data and will provide SEAs and LEAs with precise special education expenditure data with which to conduct program planning and budgeting activities. Data will be collected on site from approximately 60 LEAs and 18 SEAs. Expenditure data will be collected by age, category, and source of funding for special education and related services. A key component of this project is the development of a capacity, within selected LEAs and SEAs, to make expenditure data available in a meaningful form.

Special Studies Contracts

	Title	Contractor and Contract Number	Contract Period and Amount
32.	Technical Assistance to State Educational Agencies Participating In The State Educational Agency/Federal Evaluation Studies Program	Research Management Corp. Falls Church, VA 300-85-0098	4/30/85 - 5/30/87 $313,924

Description: Section 618(d)(3) of P.L. 99-457 authorizes technical assistance to be provided to State agencies in the implementation of the design, analysis, and reporting procedures of studies funded by the State Agency/ Federal Evaluation Studies Program. A 25-month contract was awarded to Research Management Corporation to provide technical assistance to State educational agencies participating in the program. Based upon the contractor's needs assessment of each project's study proposal, State educational agencies were offered consultation, critical analysis of reports, information search, on-site technical assistance, and participation in a series of invitational forums. Topics ranged from broad issues of research methodology, i.e., quasi-experimentation, sampling, instrumentation, and case study research, to more finite issues of participatory testing, survey methodology, questionnaire development and rating scales. The final forum focused on the dissemination and utilization of study results that emanated from the twenty-one projects funded in 1984 and 1985. A final activity of the contract is to prepare a synthesis report on the six 1984 studies that evaluated the impact and effectiveness of educational services for learning disabled children served within regular education.

Special Studies Contracts

	Title	Contractor and Contract Number	Contract Period and Amount
33.	A Study of Programs of Instruction for Handicapped Children and Youth in Day and Residential Facilities	Mathematica Policy Research Princeton, NJ 300-85-0190	9/1/85 - 5/31/86 $208,987 6/1/86 - 2/28/87 $289,447 3/1/87 - 11/30/87 $253,631 12/1/87 - 8/31/88 $190,810 9/1/88 - 2/28/89 $79,971
		Total:	$942,875

Description: This Congressionally mandated project will provide data on (1) the characteristics of the populations served in State, private, and LEA-operated day and residential schools operated exclusively or primarily for persons with handicaps, (2) the characteristics of the instructional programs offered to persons age 21 or younger in these facilities, and (3) the changes that have occurred in the number and characteristics of these facilities since the Office of Civil Rights Survey of Special Purpose Facilities was conducted in 1978-79. State and local procedures and practices which are designed to improve instructional programs and to promote the educational opportunities of handicapped children will also be identified.

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